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*Philippine Islands Bureau of public health*

BULLETIN No. 15.

**PROVINCIAL HOSPITALS  
THEIR CONSTRUCTION AND  
MANAGEMENT**

PREPARED UNDER THE DIRECTION OF THE  
**DIRECTOR OF HEALTH**

BY

**DR. VICENTE DE JESUS Y SERAPIO**

Assistant Director of Health, Chief, Division of Hospitals,  
Philippine Health Service.

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## FOREWORD.

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So many inquiries have been received at the headquarters of the Philippine Health Service for advice and assistance in the establishment, organization and management of provincial and municipal hospitals, that it has been deemed wise to prepare and publish this bulletin.

From practical experience derived from the presence, in various provinces and towns of the Islands, of the sanitary commissions, and also through the efforts of the district health officers, a real desire has made itself manifest among officials and residents of provincial towns for the improvement of health and sanitary conditions, which has first manifested itself in a practical form in attempts to secure hospitals and hospital relief.

While the first and principal duty of a health service is to prevent the appearance and spread of disease, rather than attempt its cure after having appeared, it is recognized that, until the public is educated to the point that disease can be prevented or eradicated in its incipiency, all reasonable means must be used to cure those who are suffering, for two reasons: (1) To save the life of the individual, if possible, and (2) to instruct the individual and his family so far as may be possible, during illness or convalescence, in preventive measures for his own and his family's future protection.

For the accomplishment of the above purposes the hospital provides the most practicable means now available; in addition the hospital or dispensary will be the center from which sanitary education and instruction will radiate in all directions.

To further, therefore, the cause of sanitation, it is the desire of the Philippine Health Service to assist in bringing about the establishment in each provincial capital of a provincial hospital with connecting subsidiary dispensaries in each municipality and barrio. If this bulletin will furnish the necessary preliminary information which will assist in eventually accomplishing this end, its publication will be amply justified.

The ultimate success of the hospital and dispensary system, and the assurance that the greatest good will be accomplished for the greatest number, will depend upon the previous or coincident establishment of a provincial and municipal health organization, which will act not only to prevent the occurrence of disease in large numbers of instances but will also insure the arrival of patients at the hospital or dispensary sufficiently early in the illness to assure the best results.

In the first part is given, (a) the organization and personnel of a hospital, for 6, 12, 20, or 50 beds, as the case may be, so arranged that the necessary services may be provided in each case; (b) the classification of pay and free patients in accordance with the laws in force; (c) a schedule of fees for admission of pay patients into the hospital, and lastly, (d) rules governing the technical employees, patients, and help of the hospital.

The second part includes the equipment, or a list of articles comprising: (1) hospital furniture and accessories; (2) indispensable surgical instruments; (3) laboratory apparatus and accessories, all calculated for each size of hospital according to the number of beds, with the approximate price of each article, though the current market prices may be expected to fluctuate; (4) a list of drugs and articles necessary for a small pharmacy adequate for the needs of each hospital.

In the third part, plans for five and specifications for six classes of construction are presented; from reënforced concrete, to nipa and bamboo; all being similar in arrangement so that a uniform appearance of all hospitals may be maintained and at the same time all the requirements of such an institution may be met. The approximate cost of each different type has been roughly calculated, to serve as a basis in making an estimate for the kind of hospital desired.

In conclusion, a table is given showing the estimated expenses to be incurred for the operation of each size of hospital per year, for the information of those concerned in the establishment and maintenance of such an institution.

J. D. LONG,  
*Director of Health.*

## PREÁMBULO.

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Se vienen recibiendo tantas indagaciones en la Central del Servicio de Sanidad de Filipinas solicitando consejos y ayuda para el establecimiento, organización y funcionamiento de hospitales provinciales y municipales, que hemos tenido por conveniente la preparación y publicación de este boletín.

Debido a la experiencia práctica derivada de los trabajos de las Comisiones Sanitarias en varias provincias y municipios del Archipiélago, y también a los esfuerzos hechos por los Oficiales de Sanidad de Distrito, se ha puesto de manifiesto un deseo entre los funcionarios y vecinos de los pueblos de provincias por el mejoramiento de la salubridad y las condiciones higiénicas de los mismos, el cual se patentizó primeramente por las tentativas para obtener el establecimiento y los servicios de un hospital.

Aunque el deber primordial de un servicio de Sanidad es el impedir la aparición y propagación de las enfermedades, mas bien que el tratar de curarlas una vez se hayan presentado, no dejamos de reconocer, sin embargo, que hasta que el público esté instruído al punto que las enfermedades puedan ser prevenidas o atajadas en sus incipios, se deben de utilizar todos los medios convenientes para curar a los enfermos, por dos motivos: Primero, para salvar la vida del individuo si es posible; y Segundo, para que este y su familia sean instruídos, en cuanto sea posible, durante la enfermedad o convalecencia, acerca de las medidas preventivas, para su propia protección en lo porvenir.

Para la consecución de estos objetivos, el hospital es el medio más práctico que hoy conocemos, además de que por sí o por sus dispensarios constituye un centro del que la educación e instrucción sanitarias pueden irradiar en todas direcciones.

Para promover, por lo tanto, la causa de la higienización, el Servicio de Sanidad de Filipinas tiene el propósito de fomentar el establecimiento en cada cabecera de provincia de un hospital provincial relacionado con dispensarios subsidiarios en cada municipio y cada barrio. Si este boletín llegara a facilitar todos los datos preliminares necesarios para conseguir eventualmente dicho objetivo, su publicación quedará plenamente justificada.

El éxito definitivo del sistema de hospitales y dispensarios y la seguridad de hacer el mayor bien al mayor número dependerá del establecimiento anterior o simultáneo de organizaciones sanitarias provinciales y municipales, cuya actuación no solamente prevendrá la aparición de enfermedades en muchísimos casos sino también asegurará que los enfermos acudan al hospital o al dispensario oportunamente a tiempo para conseguir los mejores resultados.

En la primera parte se expone, (a) la organización y personal de un hospital, según sea para 6, 12, 20, 50 camas, dictando reglas para que en todos casos el servicio quede debidamente cubierto; (b) clasificación de los enfermos de pago y los gratuitos con arreglo a las leyes vigentes; (c) la tarifa que debe regular la admisión de enfermos de pago en el hospital y por último, (d) las reglas a las cuales han de estar sujetos todos los empleados técnicos, enfermos y servidumbre del hospital.

En la segunda parte se incluyó el equipo, o sea un catálogo de artículos que comprende: (1) Los que sean necesarios para amueblar el hospital; (2) Los instrumentos de cirugía indispensables; (3) Los aparatos y utensilios que se requieren para un laboratorio, calculado todo ello, según el número de camas correspondiente a cada tipo, y con el precio aproximado de cada artículo, variable, como es de suponer, según los precios corrientes en plaza; (4) Una lista de drogas y artículos necesarios para un botiquín que cubra las necesidades del hospital.

En la tercera parte presentamos planes para cinco y especificaciones para seis clases de construcción, desde el de cemento reforzado al de caña y nipa, todos de distribución análoga para conservar cierta uniformidad en todos los hos-



pitales sin dejar de prevenir a todas sus necesidades. Damos el costo aproximado de cada uno de los tipos para servir de base al de la clase que se quiera construir.

Al final exponemos un cuadro demostrativo de los gastos probables de un hospital en funciones al año, en relación con el número de camas, etc., para información de cuanto estén interesados en el buen funcionamiento de un hospital.

J. D. LONG,  
*Director de Sanidad.*



## DATA FOR PROVINCIAL HOSPITALS.

### ORGANIZATION.

PARAGRAPH 1. The Director of Health has general supervision and control over all municipal and provincial hospitals.<sup>1</sup>

#### DIVISION OF HOSPITALS.

##### PERSONNEL OF THE HOSPITAL PROPER.

The district health officer of the province, any municipal health physician, or any other reputable physician may be designated by the Director of Health as chief of the hospital.

	6 beds.	12 beds.	20 beds.	50 beds.
Chief of hospital .....	1	1	1	1
Chief nurse.....			1	1
Nurses .....	1	1	2	4
Clerk, dispensing clerk, cashier and property officer.....	1	1	1	1
Intern .....				1
Cook.....	1	1	1	1
Servants.....	1	2	8	6

The appointment of all technical employees shall be approved by the Director of Health. Servants may be employed, as required by the chief of the hospital after first obtaining proper authority.

#### GOVERNMENT PAY PATIENTS.

PAR. 2. Government employees receiving over ₦960 per annum shall pay the hospital charges in accordance with the rates herein established by the Director of Health, with a discount of  $33\frac{1}{3}$  per cent. They shall be entitled to free professional services by the hospital physicians. They may have the services of reputable outside physicians at their own expense. (Secs. 1, 2, and 4, Act No. 2456.)

<sup>1</sup> Administrative Code, Sections 747 (a) and 841.

Officers and employees of the Government of the Philippine Islands and their families shall cease to enjoy the privileges of free medical assistance from January 1, 1918; they are reserved, however, from that date, the right of priority in the admission to the free wards on account of being Government employees, if they now have that right by law.

The family of an employee will be understood to be his wife and minor children.

#### FREE PATIENTS.

PAR. 3. Free patients shall be understood to be anyone having the right to free medical assistance and accommodation in the hospital, to wit:

(a) Employees of the Insular Government receiving an annual salary of less than ₱960.

(b) Employees of a provincial government who are entitled by law to free medical attention and accommodation at a Government hospital.

(c) Municipal employees who are entitled by law to free medical attention and accommodation at a Government hospital.

(d) Poor patients, whose request for admission is made by a member of the provincial board, by the district health officer, the municipal president or municipal physician, and all emergency cases requiring immediate treatment. The chief of the hospital shall have authority to admit a limited number of poor patients who are deserving and whose treatment is not otherwise provided for by law.

It shall be understood, in all cases where free medical attendance is requested for poor persons, that their admission will depend upon the number of beds available at the hospital.

#### PAY PATIENTS.

PAR. 4. A. *Non-Government patients*.—Those not in the Government service shall pay the regular hospital charges, and in addition shall be responsible for the payment of any charges accruing for professional services received.

## CONTAGIOUS AND INFECTIOUS CASES.

PAR. 5. Contagious and infectious cases shall be isolated in a room separate from the hospital proper, and care shall be taken that there is no direct communication between such cases and the patients and employees of the hospital, except as may be absolutely necessary for the care of the sick person. *It is in the interest of public health that such cases be carried as free patients.*

PAR. 6. Incurable, epileptics, insane, and incurable chronic cases should not as a rule be admitted to the hospital, and if admitted, should not be kept beyond a reasonable time necessary to determine the nature of their diseases. The hospital is intended for the treatment of curable diseases and care should be taken that it is not made use of as an almshouse nor as a home for incurables.

## OUTSIDE CASES.

PAR. 7. Officers and employees of the Government entitled to treatment shall, when practicable, apply in person at the hospital. When from the seriousness of the disease or injury he is prevented from going to the hospital, the physician on duty shall visit the patient at his residence or wherever he may be. The physician shall determine whether it is to the interests of the patient to remain in his house or to be transferred to the hospital for treatment. If in the physician's judgment the patient may be removed to the hospital, his refusal to be removed will relieve the hospital staff of all responsibility regarding the case. Subsequent visits may be made at the discretion of the chief of the hospital.

## ADMISSION AND DISCHARGE OF PATIENTS.

PAR. 8. A small room, if one is available, and, if not available, a small space, shall be reserved in which a bed shall be kept constantly ready to receive patients immediately upon their arrival at the hospital.

On arrival of a patient, he shall *at once* be placed in the "receiving bed" and made as comfortable as possible by a nurse, pending the arrival of the chief of the hospital.

Patients shall be admitted to the hospital by, or upon the approval of, the chief of the hospital. Admission sheet shall be filled out by the clerk or by the nurse on duty, the patient assigned to a permanent bed, and the physician notified. If practicable, new patients should be kept apart from other patients until examined by the doctor and the nature of their sickness determined; this in order to avoid the transmission of communicable diseases. Patients will ordinarily be admitted between the hours of 8 a. m. and 12 m., but emergency cases shall be admitted at any hour and shall receive prompt attention. Patients will ordinarily be discharged between 8 a. m. and 12 m., but may be discharged at any hour by the chief of the hospital. Upon the discharge of the patient from the hospital the *final* diagnosis shall be entered on the chart, the condition of the patient at time of discharge and the date and hour of discharge noted by the physician discharging the patient.

#### VISITING HOURS.

PAR. 9. Ward patients are entitled to receive visitors from 3 to 5 p. m. daily. Private room patients may receive visitors from 10 a. m. to 12 m. and from 3 to 5 p. m. daily. Visitors are permitted to visit patients at the discretion of the attending physician. If the patient's physician is of the opinion that the receiving of visitors is prejudicial to the interests of the patient, he may order that all visitors be excluded from such patient. It shall be the duty of the nurse in charge of such patient to enforce this order. Visitors shall not be permitted to see patients except they first obtain permission from the clerk or from the nurse in charge of the patient. All articles intended as gifts for patients shall be left with the clerk, who shall receipt for same. Under no circumstances shall articles of food, drink, etc., be given to patients by visiting friends or relatives.

#### HOSPITAL CHARGES.

##### PAR. 10. Daily charges:

Ward, ordinary diet .....	₱0.75
Ward, extra diet .....	1.00
Private room, 2 to 4 beds.....	2.00
Private room, 1 bed.....	3.00

Maternity cases and children shall be admitted at the regular rates. Children not sick should ordinarily not be kept in the hospital, as the room is needed for sick people. If it is not advisable to separate a sick mother from her babe in arms, the mother must provide a caretaker at her own expense. The caretaker may be subsisted at the hospital at the rate of ₱1 per day. The child shall be charged for extra at the rate of ₱1 per day.

The above charges may be altered with the approval of the Director of Health to meet special conditions prevailing in the respective provinces.

#### FEEES FOR SPECIAL NURSES PROVIDED BY THE HOSPITAL.

PAR. 11. Special nurses may be provided, when available, at the following rates, which should be paid by the patient in advance:

	Per week.
For American nurses .....	₱48
Filipino graduate nurses.....	39
Pupil nurses .....	30

Patients to be transferred to other hospitals may be accompanied by a special nurse in case their attending physician decides this to be necessary. If the services of one of the hospital nurses may be dispensed with temporarily, the chief of the hospital may detail a nurse to accompany the patient, all expenses for nurse's fees, transportation, etc., being paid in advance.

PAR. 12. Pay patients:

#### *Operating-room charges.*

Minor operation .....	₱6.00
Major operation .....	9.00
Anaesthetics .....	6.00 to 9.00
Dressing for outside patients.....	.30 to .90

PAR. 13.

#### *Laboratory charges.*

For microscopical examination of feces, sputum, blood, urine, etc.....each....	₱1.50
Other examinations to be made by the Bureau of Science (see Bureau of Science price list).	

## PAR. 14.

*Miscellaneous charges.*

For use of electric fan where available, per day....	₱0.90
For messenger, per trip .....	.45
Prescriptions (for each 5 days' supply).....	.30

Medicines and articles of diet not on the regular list shall be charged to the patient.

Nurses accompanying patients shall be charged at the rate of ₱3 per day for subsistence and quarters.

Ordinarily meals shall not be served to visitors; in case it shall be necessary to serve meals, a charge of ₱1 per meal shall be made.

Extra meals for occasional guests of hospital employees shall be charged for at the rate of 75 centavos per meal.

## PETS.

PAR. 15. Dogs or other animals, birds, etc., shall not be permitted in the hospital. It shall be the duty of the chief of the hospital to enforce this order.

## FREE PUBLIC CLINIC FOR INDIGENTS.

PAR. 16. The chief of the hospital, with the approval of the Director of Health, may conduct a free public clinic for the poor, two or three days each week, whenever the necessary funds are available. To prevent abuse of the privileges of the hospital and harm to the patients themselves, it shall be required that each poor patient be identified and certified as such by the municipal treasurer. In case such certificate is not presented, each patient shall be charged 10 centavos for each consultation with the medicine necessary at the moment, and 30 centavos for each consultation with prescription to last five days.

This clinic shall be attended alternately by the chief of the hospital and the visiting physician if any.

At the end of each month, the chief of the hospital shall send a report to the Director of Health, of the major operations performed, and of attendance at the clinic, showing the diagnoses of the cases treated, medical or surgical, sex, nationality of patients, minor operations, prescriptions filled, and other information required by the Director of Health.



**REGULATIONS GOVERNING OFFICERS AND EMPLOYEES OF  
OF THE HOSPITAL.**

**THE CHIEF OF THE HOSPITAL.**

PAR. 17. Under the Director of Health, the chief of the hospital shall have the entire responsibility and authority for the proper management of the hospital and its employees and for the care and treatment of the patients admitted to the hospital, it being understood that patients shall have the privilege of employing their own private physician should they so desire, and also that the Director of Health may designate other physicians to render professional services to such patients as he may deem advisable.

He shall have general supervision of the hospital administration and his recommendation shall be required for all promotions, reductions, fines, or discharges of hospital employees.

He shall act as pharmacist in case there is no other available person for this duty.

He shall be responsible for all hospital property and shall sign all requisitions for new supplies, property, etc. He shall incur no liabilities nor make any purchase except by authority of the Director of Health in the case of Insular hospitals; the provincial treasurer in the case of provincial hospitals; or the municipal treasurer in the case of municipal hospitals; and in conformity with the rules of the Purchasing Agent.

He shall prepare and sign all official correspondence referring to the hospital, and shall submit such reports as may be required by the Director of Health.

He shall see that a proper clinical history is prepared for each patient admitted to the hospital, and shall see that the clinical record is properly executed and signed, upon the discharge of the patient, and that such record be kept on file for future reference.

He shall keep a record of patients applying for treatment and refusing to remain in the hospital after being advised to do so by the physician examining them.

He shall see that all birth and death certificates are properly executed.

## DUTIES OF THE CLERK.

PAR. 18. The duties of the clerk of a hospital may be performed by the chief of the hospital or by such person as may be designated by the Director of Health, and such person shall be responsible for the preparation of and safe-keeping of the records of the hospital. He shall observe and cause to be observed the rules of the hospital and those contained in the laws and the Manual of the Bureau of Health (Art. XVIII, pars. 567 to 588).

He shall, under the direction of the chief of the hospital, personally examine and act on all bills, communications, requisitions, and other papers concerned in the administration of the hospital, and shall be responsible for all hospital correspondence and records and see that all other clerical work is properly performed.

He shall see that economy is exercised and discipline maintained among employees; that order is maintained in the hospital; that no discrimination be shown between patients in accommodation or treatment; and that no property shall be permitted to be removed from the hospital except under the rules prescribed by the Insular Auditor.

He shall make daily inspection of the hospital and grounds to see that the same are kept in good sanitary condition and that the rules of the institution are being enforced.

He shall prepare an efficiency report of all employees for the Director of Health semiannually, to be signed by the chief of the hospital.

Except in an emergency, he shall incur no liabilities without the consent of the chief of the hospital, and such liabilities, when incurred, shall be promptly reported to the chief.

He shall endeavor to adjust all complaints received from patients.

In case of loss or damage of hospital property due to carelessness or neglect, and the responsibility for such loss or damage can be definitely determined, he shall see that the proper person reimburses the Government therefor.

He shall prepare admission sheets for patients admitted to the hospital.

He may open official hospital mail, and shall distribute mail to employees and patients.

Under the chief of the hospital, he shall have charge of and assign to duty all unclassified employees of the hospital while at work outside of the hospital and shall render an efficiency report of such employees whenever required by the chief of the hospital.

During the temporary absence of the chief of the hospital he may act for him in matters pertaining to the hospital business administration.

Upon request for admission, the patient shall immediately be placed in the receiving bed, and made comfortable by a nurse. The clerk shall then immediately satisfy himself that the case is in accordance with the hospital rules before admitting him. In every Government case he shall send a written notice of the admission to hospital to the proper Bureau or office within twenty-four hours.

He shall be responsible for the admission and discharge of patients from the hospital, under the direction of the chief of the hospital, and see that the clinical charts are properly completed by the physician before filing.

In case of his absence during hospital hours, he shall indicate in so far as possible where he may be reached promptly by telephone, messenger or otherwise.

He shall organize an efficient fire drill for the prompt removal of patients and the preservation of Government property and shall make weekly tests thereof.

He shall be responsible for all duties generally devolving upon a hospital superintendent, and shall be directly responsible to the chief of the hospital.

He shall perform such other duties as may be required by the chief of the hospital.

#### DUTIES OF THE PROPERTY OFFICER.

PAR. 19. The Director of Health shall appoint a property officer or designate one of the hospital employees to act in this capacity.

The property officer shall be directly responsible for all Government property about the hospital and grounds, and shall execute proper receipts for same.

He shall render such reports on property as may be required by the Director of Health or the Insular Auditor.

He shall receipt for all new hospital supplies and equipment received.

He shall examine all hospital supplies received before they are receipted for, and shall note their condition. A note should be made of all unserviceable or damaged property received.

He shall keep a record of all supplies issued.

He shall permit no hospital property to be removed from the hospital except in accordance with the rules of the Insular Auditor.

Hospital supplies, equipment, etc., not in actual use should be kept in a room securely locked, and no one should be permitted to unlock or enter such room except in the presence of the property officer.

He shall preserve all unserviceable and broken or useless supplies and equipment and semiannually bring them before an inspector from the Auditor's office for condemnation and disposal, making the necessary report on same to the Auditor.

He shall see that all hospital supplies are marked with the proper marks before being issued.

He shall perform such other duties as may be required by the chief of the hospital.

#### DUTIES OF THE CASHIER.

PAR. 20. The Director of Health shall designate a hospital cashier or an employee of the hospital to act in this capacity.

It shall be the duty of the cashier to receive all funds accruing to the hospital and to preserve them in a safe provided for this purpose. The safe should be kept locked.

He shall deposit to the credit of the Government, before 12 m. Saturday, in such depository as may be designated, all funds received during the week; provided that if the total cash on hand at any time exceeds ₡200, he shall make deposits more frequently.

Hospital charges shall ordinarily be cash or payable in

advance. Credit will not ordinarily be extended except to persons whose responsibility is above question, or employees of the Government.

The cashier shall present bills for collection on the first of each month. Those not paid by the 15th shall be reported to the chief of the hospital for action. In the case of Government employees, the bills for services shall be forwarded, through the Director of Health, to the respective Chief of Bureau for collection.

The cashier shall not be required to leave the hospital for the purpose of collecting bills. Bills are payable at the hospital office, but the clerk shall exercise all care and use all reasonable means to collect accounts due.

He shall prepare and pay bills for services rendered to the hospital, and shall see that such bills correspond in detail with the services received before paying same.

In case of his absence during hospital hours, he shall indicate so far as practicable where he may be reached by telephone, messenger or otherwise.

He shall be responsible directly to the chief of the hospital.

He shall collect for all prescriptions, dressings, etc., furnished by the hospital.

He shall perform such other duties as may be required by the chief of the hospital.

#### DUTIES OF THE PHARMACIST.

PAR. 21. The duties of the pharmacist shall be performed by the chief of the hospital, or by a duly qualified pharmacist designated by the Director of Health. The pharmacist shall be directly responsible to the chief of the hospital.

He shall have charge of all employees in the pharmacy.

He shall prepare and fill all prescriptions presented between the hours of 8 a. m. and 12 m. and from 3 to 6 p. m., and at such other times as may be required by the exigencies of the service.

He shall prepare requisitions for medical supplies pertaining to his department, and it shall be his duty to see that sufficient supplies are on hand to meet the ordinary demands of the hospital until the arrival of fresh supplies.

He shall be responsible for the cleanliness and good condition of the pharmacy in general and shall maintain the same at the standard demanded of a first-class pharmacy.

Doctors submitting prescriptions for articles not on the list approved by the Director of Health shall be advised that if they desire to have the same filled they must furnish the ingredients at their own expense. No prescription shall be refilled except on the order of the original writer. Except for hospital cases, medicines will be issued only on prescription.

He shall exert the utmost economy in the filling of prescriptions and ordinarily only a sufficient amount of the medicine to last for five days should be dispensed. In case a larger amount is called for in the prescription, it shall be his duty to invite the attention of the physician to this rule. If the physician desires an extra amount of medicine, the same may be furnished.

He shall perform such other duties as may be required by the chief of the hospital.

#### DUTIES OF THE HOUSE PHYSICIAN.

PAR. 22. Any reputable physician may be detailed by the Director of Health as house physician (provided he first pass such professional examination as may in the discretion of the Director of Health be required). In case the services demand it, two or more house physicians may be detailed for duty in the same hospital. The house physician shall be directly responsible to the chief of the hospital and shall perform such duties as may be assigned to him by the chief.

He shall visit every patient under his care every morning and evening or as frequently as may be required, and shall attend every new patient as soon as practicable after admission, and shall prepare a clinical history of the patient. If the patient be in a serious condition, he shall, if practicable, immediately notify the chief of the hospital to this effect.

He shall promptly isolate contagious and infectious cases.

He shall note on the chart the condition found after surgical dressings, and shall complete the clinical records,

diagnosis, condition at time of discharge, etc., of all patients to be discharged from the hospital.

He shall not absent himself from the hospital except by permission from the chief of the hospital, and then shall leave his address where he may be found by messenger, telephone or otherwise.

He shall have no corrective jurisdiction over employees of the hospital, but shall report irregularities or faults to the chief of the hospital for attention.

Orders concerning patients shall be entered on the charts.

He shall provide the clerk with the necessary information for the proper execution of birth and death certificates and for the accomplishment of such professional documents as may be required of him and for the proper preparation of medical certificates concerning patients who have been under his care, and all such records shall be signed by the Chief of the hospital. In cases of emergency, however, such documents may be signed by the house physician.

Unless it be an emergency, he shall undertake no operations nor extraordinary measures except with the concurrence of the chief of the hospital.

No gynecological examination shall be made except in the presence of a woman nurse.

He shall be responsible for the outpatient service and see that all regulations in regard to this service are carried out.

When not otherwise employed, he shall, if necessary, give anaesthetics.

He may not prescribe for employees of the hospital except as directed by the chief of the hospital.

He shall comply with all hospital orders regarding the welfare and treatment of patients, and shall investigate and advise regarding reports from nurses as to the needs of the hospital.

Before entering upon his duties he shall familiarize himself with the hospital regulations and sign a statement that he has read the regulations and that he will faithfully perform his duties and observe the rules provided for him.

Under no circumstances shall the house physician be permitted to receive payment, either directly or indirectly, for professional services rendered or to be rendered in the fu-

ture. House physicians infringing upon this rule will be subject to immediate dismissal from the service.

He shall not give any certificate or statement regarding the condition of any patient in the hospital except he be specifically authorized to do so by the chief of the hospital.

He shall make such laboratory examinations as may be required by the chief of the hospital.

#### DUTIES OF THE CHIEF NURSE.

PAR. 23. The chief nurse shall be detailed for duty by the Director of Health.

She shall have charge of all other nurses attached to the hospital and of all unclassified employees on duty with the sick residing in the hospital.

She may be detailed as clerk of the hospital whenever the Director of Health considers this in the interests of the service.

She shall be responsible for the general welfare of the patients and for the management of the wards, the nurses' home, and the quarters for the pupil nurses.

She shall be responsible for the cleanliness and proper sanitary condition of the interior of the hospital. She shall see that reasonable care is taken of and repairs made to the hospital linen and the hospital property.

She shall be personally responsible for the supervision of the laundry.

All nurses and employees under her supervision shall report to her daily. Subject to the approval of the chief, she shall assign their hours and duties.

She shall have direction of the training of the pupil nurses and oversight of their general conduct and welfare.

She shall make a monthly inventory of all linen and other property and report to the property officer.

She shall be directly responsible to the chief of the hospital.

#### DUTIES OF THE DIET NURSE.

PAR. 24. The chief nurse or any other available nurse may be assigned by the Chief of the hospital as dietist.

She shall have direct control of the cooks and servants



employed in the kitchen and shall report any disobedience of orders to the Chief nurse, who shall report same to the Chief of the hospital for discipline.

In addition to her duties as dietist, she may be required to perform such other duties as the chief of the hospital may direct.

She shall make out daily menus for the patients in accordance with approved dietetic rules, and menus for the employees and shall submit them to the chief of the hospital, or to the house physician if the latter is in charge, who shall change them, if necessary, and approve and forward them to the clerk for purchase. These menus shall be submitted to the clerk twelve hours in advance of the time they are to be used.

She shall make daily requisition for commissary supplies, which shall be brought to the office for approval and entry, not later than 5 p. m. each day.

She shall see that meals are prepared and served at the hours stated by the chief of the hospital. She shall see that these hours are rigidly adhered to and shall report any tardiness of officials or employees.

She shall be responsible for the cleanliness of the kitchen, store-rooms, cold storage, and dining rooms.

She shall be responsible for the proper disposition of the garbage and for the cleanliness of the garbage cans.

She shall visit all pay patients once a day to inquire about the preferences, which may be practicable, of the patients in matters of diet. She shall visit all wards daily and consult with the head nurse in regard to diet of patients.

She shall report defects in the equipment of her department to the chief nurse, who will report same to the Chief of the hospital.

She shall make a monthly inventory of all the property in her department and report thereon to the property officers.

She shall have charge of the teaching of dietetics to pupil nurses while in her care.

She shall be directly responsible to the chief nurse and the chief of the hospital, for the faithful fulfillment of her duties.

## DUTIES OF THE NURSES.

PAR. 25. A. *Day head nurses*.—The nurse of each ward shall be responsible for the enforcement of the ward rules, the making of inventories, the personal care of the patients, cleanliness of the ward, rooms and halls surrounding the ward, and of the equipment and furniture.

She shall be responsible for the conduct of the nurses and patients, for the prompt and accurate carrying out of the physicians' orders, for the efficient keeping of the bedside records, the care of the hospital property and patients' clothing, and the proper serving of diets to the patients in her care.

The day head nurse shall make the rounds with the night nurses coming on duty in the evening and with the night nurses going off duty in the morning.

She shall report at once to the chief nurse any cause of complaint during such rounds. She shall report fully to these nurses the condition of the patients, the needed supplies and provisions, etc.

The day head nurse shall make a full report in writing to the night nurse concerning the condition of the patients, the conduct of the employees, the need of supplies, use of the same, and needed repairs. She shall read to the night nurse her report and shall make any necessary explanations with regard to new measures or orders.

The day head nurse will report to the chief nurse, before 8 a. m. daily, on everything needed for the better service and good order of the ward.

She shall report to the chief nurse any dissatisfaction of the patients, and any discourtesy or inefficiency shown by the employees in her ward.

She shall be responsible for the appearance and cleanliness of the employees of her ward and of the economical administration and general management of her ward.

Except in case of emergency, she shall see that all employees in her ward are on time for their meals.

She shall be directly responsible for the male attendants and will assign their duties.

She shall see that the medicine closet is locked with the medicines inside and retain the key. She shall see that a

properly equipped hypodermic tray is always kept ready for immediate use.

She shall report direct to the chief nurse and chief of the hospital.

*B. Night nurse.*—The responsibility of the night nurse shall comprise a period of twelve hours daily, from 7 p. m. to 7 a. m. next morning. She shall be responsible for the care and welfare of the patients, the administration of the wards, and the conduct of the employees during her hours of duty.

She shall make a written report to the chief nurse every morning and a verbal report in addition when necessary.

She shall keep with her, when on duty, keys to the emergency closet, linen closet, and supply rooms, and shall report daily to the chief nurse concerning supplies expended.

She shall see that the nurses and employees do not sleep while on duty.

She shall see that the midnight supper is properly prepared and served to those entitled to it, and she shall see that visitors leave promptly at 8 p. m., that all patients are comfortably settled for the night, and that the wards are quiet and silent for the necessary rest of the patients.

She shall attend to the admission of all patients during the night and shall render them all necessary aid, and call the house physician in cases of emergency.

She shall be responsible for the prompt and accurate carrying out of all orders issued by the physicians and for the keeping of bedside records.

#### GENERAL RULES FOR PATIENTS.

PAR. 26. Patients desiring to be absent from the hospital shall obtain written permission from their attending physician or surgeon during regular morning rounds. Passes shall be presented in the office by the patients in person before they leave the hospital. Regular hospital charges will be made against patients while absent on pass. Except under extraordinary circumstances no passes shall be granted permitting absences between 8 p. m. and 8 a. m. A patient on pass shall report to the office and have his pass canceled upon his return to the hospital.

## VALUABLES AND CLOTHING.

PAR. 27. The hospital will not be responsible for money or valuables unless they are given to the clerk who shall deposit them in the safe and give a receipt for them to the patient. In case of demise of a Government patient, the clerk will notify the provincial fiscal through official channels of any valuables or personal effects left in his care by the deceased, and if the latter be a private citizen such valuables and effects should be handed over to his family or relatives.

## PRECAUTIONS IN REGARD TO LOSS.

PAR. 28. All reasonable precautions will be taken to prevent loss of a patient's property or clothing but the hospital will not be responsible for the destruction of clothing by insects, vermin, disinfection, fire nor by any other means.

## SMOKING, GAMBLING, ETC.

PAR. 29. Smoking, gambling, loud talking, swearing or obscene language, or otherwise disturbing the peace, and spitting except in receptacles provided for the purpose shall not be permitted. Patients shall not leave the hospital with hospital property in their possession. It shall be the duty of the nurses to enforce these rules.

## COMPLAINTS.

PAR. 30. Patients having complaints to make will call for the complaint book in which they will write their complaints with the date and signature. This complaint book must be sent to the office of the clerk as soon as possible after the patient has entered the complaint. The clerk shall initial the complaint to show that he has read it and return the book to the ward for inspection of the patient. All complaints, in so far as possible, shall be adjusted by the clerk; in case this is not practicable, the patient may appeal to the chief of the hospital. The chief of the hospital shall inspect the complaint book as required.

## FIRE DRILL.

PAR. 31. There shall be regular fire drill instruction for employees and drill shall be ordered at unexpected times under the direction of the clerk.

#### LABORATORY EXAMINATIONS.

PAR. 32. Specimens of urine, etc., for those entitled to free examinations shall be sent to the laboratory accompanied by a suitable laboratory blank signed by the doctor requesting the examination. The reports on such examinations shall be recorded in the laboratory book and the original report immediately forwarded to the physician who requested the examination. Government employees who employ private physicians at their homes are not entitled to free examinations at the hospital laboratory.

#### METRIC SYSTEM.

PAR. 33. The metric system shall be used in all matters pertaining to the hospital including all prescriptions.

#### TRANSPORTATION.

PAR. 34. Officers and employees having occasion to use transportation on official business shall make written application to the clerk.

#### STANDING ORDERS.

PAR. 35. Hospital orders shall be issued by the chief of the hospital.

#### GENERAL RULES FOR EMPLOYEES.

PAR. 36. No nurse or attendant shall take more than one half hour of time for any one meal. Employees will not be permitted to take meals in any other dining room at the hospital than the one to which they have been assigned. Employees shall be assigned to dining rooms by the chief of the hospital.

All employees shall be at their meals on time except in cases of unavoidable delay.

Doctors, nurses, attendants, or other employees who have guests for meals shall notify the cashier who shall collect a charge of 75 centavos for each extra meal served.

Any breach of etiquette shall be reported to the chief of the hospital by the person observing it.

#### UNIFORMS AND BADGES.

PAR. 37. Uniforms, badges, etc., for doctors, nurses, and others connected with the hospital, shall conform to the

requirements of the Philippine Health Service. Employees shall wear their official uniform while on duty.

#### CARE OF PATIENT'S CLOTHING.

PAR. 38. Upon admission of a patient to a ward the nurse in charge shall take an inventory of all his personal effects and enter this list in the clothing book kept for that purpose, dating and signing the entry. A duplicate list, dated and signed, shall be attached to the clothing which must be neatly tied in a package, disinfected if practicable, and sent to the office of the clerk who will have them placed in the locker room provided for that purpose in the hospital. When a patient is discharged his effects shall be returned to him and he shall receipt for them by signing the list in the clothing book. Upon the demise of a patient his personal effects shall be disposed of by the chief as provided in paragraph 27.

Ward patients shall wear hospital clothing during their stay in the hospital.

#### ORDERS AND ORDER BOOKS.

PAR. 39. In so far as possible, no nurse or attendant shall be required to heed a verbal order for the treatment of a patient, except minor requests, or of extreme emergency, in the presence of the patient. All orders shall be written in the ward book provided for that purpose. If in an emergency the doctor is obliged to send an order to a ward written on a slip of paper, it shall be pasted in the regular order book in proper sequence. All orders, or groups of orders, shall bear date, time, and doctor's signature. After an order has been executed it shall be countersigned in ink with the name of the nurse who carried it out. Standing orders will not be discontinued or revoked until the word "discontinued" is written across the order and signed by the physician discontinuing or revoking it. A nurse receiving a verbal order shall respectfully call the attention of the doctor to this rule.

#### MEDICINE AND POISON CLOSETS.

PAR. 40. Medicine closets, with the medicines in them, shall be kept locked, and the key placed out of reach of

unauthorized persons. Medicines shall be dispensed only by the nurse in charge of the ward or under her immediate direction.

#### INFORMATION REGARDING PATIENTS.

PAR. 41. All nurses, attendants, and other employees are forbidden to give information to patients or to others regarding courses of treatment, prescriptions, medicines ordered, results of laboratory tests, temperatures or other similar matters. All inquiries from patients or their friends regarding such matters shall be referred to the physician in charge of the case. Clinical case records shall be in the custody of the nurse in charge of the ward where the patient is being treated. The nurse in charge shall not allow any person to see the clinical record except the physician in charge of the case. The house physician shall sign all records of other than private patients prior to the discharge of the patient and after examining such records shall place them in a sealed envelope addressed to the chief of the hospital, if present. It shall be the duty of the chief of the hospital if present to inspect all such records received by him and to see that they are protected from scrutiny by unauthorized persons. If the chief of the hospital is not present, the house physician shall send the completed record direct to the clerk. The chief of the hospital shall scrutinize all such records upon his return to the hospital. The case shall be sent to the office of the chief at least one hour in advance of the patient's discharge.

#### DANGEROUSLY ILL PATIENTS.

PAR. 42. The nurse in charge of a patient desirous of conversing with a representative of a religious body shall request the clerk to send for the person of the patient's choice, to attend him and due seclusion shall be arranged for during the visit of such person, so as not to disturb other patients.

#### REQUISITIONS FOR SUPPLIES.

PAR. 43. The property clerk shall prepare requisitions for all supplies. Such requisitions shall be reviewed by the clerk and signed by the chief of the hospital. All

general supplies shall be kept in the subsistence storeroom under the direct charge of the property officer, who shall be responsible therefor to the chief of the hospital. Nurses, dietist, and other authorized employees shall make requisitions for supplies on such days as may be designated by the chief of the hospital. Such requisitions shall be written in a requisition book with indelible pencil or ink, dated and signed by the person making the requisition. All unserviceable property shall be exchanged at the same time, such property being properly itemized in the requisition book under the word "exchange," and receipted for by the clerk. All articles for exchange shall be brought to the storeroom in a cleanly condition. Nurses shall be held directly responsible for compliance with this rule. Under no circumstances shall hospital property be thrown away if broken or unserviceable. Everything shall be returned to the storeroom to be officially condemned. Requisition books shall be sent directly to the office of the property officer, who will countersign them before issuing the supplies.

The subsistence storeroom shall be open daily at the hours to be decided by the chief of the hospital. All food supplies shall be requisitioned for by the dietist at least twelve hours in advance. Such requisitions shall be countersigned by the property officer when the supplies are issued. Under no circumstance shall the subsistence storeroom be opened except by or in the presence of the property officer. Employees requisitioning for supplies shall examine same as soon as received, and all articles requisitioned and signed for but not received shall be noted in the requisition book and notice of such shortage sent to the property officer at once.

#### LINEN AND LAUNDRY.

PAR. 44. All linen shall be kept in the rooms provided for that purpose. Clean linen shall be cared for and kept by the person assigned to that duty; soiled linen shall be removed to the containers provided for that purpose. Linen used by patients shall be thoroughly disinfected and aired before being sent to the container. An inventory of the linen shall be made each month on the day specified by the chief of the hospital.



## DISSATISFACTION OF EMPLOYEES.

PAR. 45. Should any member of the resident staff, or any employee of the hospital, feel aggrieved from any cause associated with his work, or become dissatisfied with his assignment, he shall state in writing the grounds therefor to the chief of the hospital who shall, on sufficient notice, give a hearing to all concerned and decide the question involved. In cases within the exclusive jurisdiction of the civil service he shall forward such correspondence to that Bureau through official channels.

## OFFICIAL COMMUNICATIONS.

PAR. 46. All official communications to the Director of Health or any branch of the Government shall be forwarded through the chief of the hospital, and unless they are so forwarded no action will be taken.

## POLITICAL INFLUENCE.

PAR. 47. It is advisable in the interests of the service that political influence shall not enter into the workings of the hospital. Employees of the hospital are advised against seeking, either directly or indirectly, any political influence regarding the service of themselves or their friends while attached to the hospital. Disobedience of this paragraph will be reported to the Director of Health for the application of such disciplinary measures as the case may require.

## ORGANIZACIÓN.

PÁRRAFO 1. El Director de Sanidad tendrá supervisión y *control* general sobre todos los hospitales provinciales y municipales.<sup>1</sup>

### DIVISIÓN DE LOS HOSPITALES.

#### PERSONAL DE HOSPITALES.

El oficial de sanidad de distrito de la provincia, cualquier médico municipal, u otro médico particular de reputación, podrá ser designado por el Director de Sanidad como jefe del hospital.

	6 ca- mas.	12 ca- mas.	20 ca- mas.	50 ca- mas.
Jefe de hospital .....	1	1	1	1
Jefe enfermera .....	1	1	1	1
Enfermeras .....	1	1	2	4
Administrador, despachador, cajero y almacenero .....	1	1	1	1
Internos .....				1
Cocinero .....	1	1	1	1
Servidumbre .....	1	2	3	6

El nombramiento de todos los empleados técnicos tiene que ser aprobado por el Director de Sanidad. El jefe del hospital puede emplear la servidumbre que necesite después de haber obtenido la autorización necesaria.

#### ENFERMOS DE PAGO DEL GOBIERNO.

PÁR. 2. Los empleados del Gobierno que perciben mas de ₱960 al año pagarán los derechos de hospital de acuerdo con la tarifa aquí establecida por el Director de Sanidad, con un descuento de  $33\frac{1}{3}$  por ciento. Tendrán derecho a los servicios profesionales gratis de los médicos del hospital. Podrán tener los servicios de médicos reputados de fuera pero a su propio costo. (Arts. 1, 2 y 4, Ley No. 2456.)

Los funcionarios y empleados del Gobierno de las Islas Filipinas y sus familias dejarán de gozar de los privilegios

<sup>1</sup> Código Administrativo, artículos 747 (a) y 846.

de asistencia médica gratuita desde el 1.º de enero de 1918; se les reserva, sin embargo, desde esta fecha el derecho de prioridad en la admisión a las salas gratuitas por ser empleados del Gobierno, si por la ley tienen este derecho.

Se considerará familia de un empleado solamente a la esposa e hijos menores de edad.

#### ENFERMOS GRATUITOS.

PÁR. 3. Se entenderá como enfermos gratuitos a los que tienen derecho a la asistencia médica y acomodación gratuitas en el hospital, y son :

(a) Empleados del Gobierno Insular que reciben un salario anual menor de ₧960.

(b) Empleados del gobierno provincial que por la ley tengan derecho a asistencia médica y acomodación gratis en el hospital.

(c) Empleados municipales que por la ley tengan derecho a asistencia médica y estancia en el hospital.

(d) Enfermos pobres cuya admisión sea solicitada por algún miembro de la junta provincial, por el oficial de distrito, por el presidente municipal o médico municipal, y los casos de urgencia que requieran un tratamiento inmediato. El jefe del hospital tendrá autorización para admitir un número limitado de enfermos pobres que lo merezcan y cuyo tratamiento y asistencia no están provistos de otra manera por la ley.

Se entenderá en todos los casos en que se ha pedido la asistencia gratuita de un enfermo pobre, que su admisión dependerá de la cama o camas disponibles en el hospital.

#### ENFERMOS DE PAGO.

PÁR. 4. A. *Enfermos no del Gobierno.*—Los que no están al servicio del Gobierno deberán abonar los derechos ordinarios del hospital y además serán responsables de pago de cualesquiera derechos por servicios profesionales recibidos.

#### CASOS CONTAGIOSOS E INFECCIOSOS.

PÁR. 5. Los casos contagiosos e infecciosos serán aislados en una habitación separada del edificio del hospital, y se deberá tener cuidado que no haya ninguna comunicación

directa entre dichos casos y los enfermos y empleados del hospital, excepto la absolutamente necesaria para el cuidado del enfermo. *Es de interés para la salud pública que dichos casos sean considerados como enfermos gratuitos.*

PÁR. 6. Por regla general no se admitirán en el hospital epilépticos incurables, dementes y casos crónicos incurables, y de ser admitidos no se les debe retener más que el tiempo necesario para determinar la naturaleza de la enfermedad. El hospital se entiende que es solo para el tratamiento de enfermedades curables y se debe tener cuidado que no se haga uso de él como hospicio o asilo de incurables.

#### ASISTENCIA A ENFERMOS EMPLEADOS DEL GOBIERNO FUERA DEL HOSPITAL.

PÁR. 7. Los funcionarios y empleados del Gobierno con derecho a asistencia médica deberán, siempre que sea posible, acudir en persona al hospital. Cuando por la gravedad de las lesiones o la enfermedad estuviese impedido de ir al hospital, el médico de guardia visitará al enfermo en su domicilio o en donde esté. El médico determinará si está en el interés del enfermo el permanecer en su domicilio o ser trasladado al hospital para su tratamiento. Si, a juicio, del médico, el enfermo puede ser trasladado al hospital, la negativa del paciente releva al personal de toda responsabilidad respecto al mismo. Se podrán hacer ulteriores visitas a discreción del jefe del hospital.

#### ADMISIÓN Y ALTA DE ENFERMOS.

PÁR. 8. Se deberá reservar una pequeña habitación, si la hay disponible, y sinó, un pequeño espacio, en que se debe tener constantemente dispuesto una cama para recibir a los enfermos inmediatamente de llegar al hospital.

A la llegada de un enfermo se le deberá inmediatamente poner en la "cama de recepción," al cuidado de una enfermera, en espera de la llegada del jefe del hospital.

Los enfermos deben ser admitidos al hospital por, o con la aprobación del jefe del hospital. El escribiente o enfermera de guardia deberá llenar un modelo de admisión, destinar al enfermo a una cama y notificar al médico. Si es factible, los nuevos enfermos deberán ser puestos aparte

de los demás hasta que puedan ser reconocidos por el médico y la naturaleza de su enfermedad pueda ser determinada; esto es con el objeto de evitar la transmisión de enfermedades comunicables. Los enfermos serán generalmente admitidos entre las horas de 8 a. m. y 12 m., pero los casos de urgencia serán admitidos a cualquier hora y recibirán inmediata atención. Los enfermos serán de ordinario dados de alta entre las 8 a. m. y 12 m., pero podrán serlo a cualquiera hora por el jefe del hospital. Al ser dado de alta un enfermo del hospital, se deberá consignar el diagnóstico *definitivo* en su hoja clínica, el estado del paciente y la fecha y hora de la alta por el médico que da de alta al enfermo.

#### HORAS DE VISITA.

PÁR. 9. Los enfermos de sala tendrán derecho a recibir visitas de 3 a 8 p. m. diariamente. Los enfermos en habitaciones particulares podrán recibir visitas desde 10 a. m. a 12 m. y de 3 a 5 p. m. diariamente. Los visitantes se les permitirá que visiten a los enfermos a discreción del médico de cabecera. Si el médico del enfermo es de opinión que el recibir visitas será perjudicial a los intereses del enfermo, podrá ordenar que todo visitante sea excluido del paciente. Será deber de la enfermera al cargo de dicho paciente el poner en vigor dicha orden. No se permitirá a los visitantes ver a los enfermos sin haber obtenido previamente permiso del escribiente o de la enfermera al cargo del paciente. Todos los artículos que sean regalos para los enfermos se deberán dejar en poder del escribiente, que librará recibo de los mismos. Por ningún concepto se entregarán por los parientes o amigos que visitan al enfermo comestibles, bebidas, etc.

#### TARIFA DEL HOSPITAL.

##### PÁR. 10. Tarifa diaria:

Sala, dieta ordinaria .....	₡0.75
Sala, dieta extraordinaria .....	1.00
Habitación, 2 a 4 camas.....	2.00
Habitación, 1 cama .....	3.00

Puérperas y criaturas serán admitidas a la tarifa ordinaria. Los chiquillos que no están enfermos no se les debe,

por regla general, tener en el hospital, pues el espacio se necesita para personas enfermas. Si no es conveniente separar a una madre enferma de una criatura de pecho, aquella deberá proveerse de una nodriza a sus expensas. La nodriza podrá comer en el hospital a razón de ₡1 diario. Al chiquillo se le cobrará extra a razón de ₡1 al día.

La tarifa anterior podrá ser alterada con aprobación del Director de Sanidad para afrontar circunstancias especiales que prevalezcan en diferentes provincias.

#### TARIFA PARA ENFERMERAS ESPECIALES FACILITADAS POR EL HOSPITAL.

PÁR. 11. Se podrán facilitar enfermeras especiales, cuando las haya disponibles, según la siguiente tarifa, que será abonada por el enfermo por adelantado:

	Por semana.
Enfermeras americanas.....	₡48
Enfermeras graduadas filipinas.....	39
Enfermeras alumnas.....	30

Los enfermos que han de ser trasladados a otro hospital pueden ir acompañados de una enfermera especial en el caso de que lo crea necesario el médico de cabecera. Si los servicios de una enfermera del hospital pueden ser dispensados temporalmente, el jefe del hospital podrá designar una enfermera para que acompañe al paciente, abonándose anticipadamente todos los gastos por los derechos de la enfermera, su viaje, etc.

PÁR. 12. Enfermos de pago:

#### *Tarifa de sala de operaciones.*

Operación menor .....	₡6.00
Operación mayor .....	9.00
Anestesiadores .....	6.00 a 9.00
Vendaje de enfermos de afuera.....	.30 a .90

PÁR. 13.

#### *Derechos de laboratorio.*

Por el reconocimiento microscópico de deyecciones, esputos, sangre, orina, etc. cada uno—un peso y cincuenta centavos.

Por otros reconocimientos que se hagan por el Buró de Ciencias (véase la tarifa del Buró de Ciencias).

## PÁR. 14.

*Otros derechos.*

Por el uso de abanico eléctrico en donde lo haya, por día .....	₡0.75
Por cada recado de mensajero.....	.45
Recetas (por cada una de 5 días de duración).....	.30

Las medicinas y artículos de dieta que no están en la lista ordinaria serán abonados por el enfermo.

Por las enfermeras que acompañen a los enfermos se cobrará a razón de ₡3 diarios por casa y comida.

De ordinario no se servirán comidas a los visitantes; en caso que sea necesario servirles comidas se les cobrará ₡1 por cada comida.

Las comidas extraordinarias para los huéspedes casuales de los empleados del hospital se cobrarán a razón de 75 centavos por cubierto.

## ANIMALES MIMADOS.

PÁR. 15. No se permitirán en el hospital perros, aves, etc. Será deber del jefe del hospital poner en vigor esta orden.

## CLÍNICAS GRATUITAS PARA LOS POBRES.

PÁR. 16. El jefe del hospital, con la aprobación del Director de Sanidad, podrá abrir una clínica gratuita para los pobres, dos o tres días cada semana, siempre que haya disponibles fondos necesarios. Para impedir el abuso de los privilegios del hospital y perjuicios a los mismos enfermos, se exigirá que cada enfermo pobre sea identificado y certificado como tal por el secretario municipal. En caso de que no se presente tal certificado cada enfermo pagará 10 centavos por cada consulta con las medicinas necesarias para el momento y 30 centavos por cada consulta con medicinas para cinco días o más.

Esta clínica será atendida alternativamente por el jefe del hospital y el médico visitante si lo hay.

A fines de cada mes, el jefe del hospital enviará un *report* al Director de Sanidad de las operaciones mayores practicadas, las asistencias a la clínica dando los diagnósticos de los casos, clínicos o quirúrgicos, tratados, sexo, nacionalidad de los enfermos, operaciones menores, recetas des-

pachadas, y otros datos que se exijan por el Director de Sanidad.

**REGLAMENTOS QUE RIGEN A LOS FUNCIONARIOS Y  
EMPLEADOS DEL HOSPITAL.**

**EL JEFE DEL HOSPITAL.**

PÁR. 17. El jefe del hospital, bajo el Director de Sanidad, tendrá toda la responsabilidad y facultades para la debida administración del hospital, de empleados y del cuidado y tratamiento de los enfermos admitidos al hospital, entendiéndose que los enfermos tendrán el privilegio de poder emplear los médicos particulares que deseen u otros que el Director de Sanidad designe para prestar sus servicios profesionales a tales enfermos según lo crea conveniente.

Tendrá la supervisión general de la administración del hospital y su recomendación será necesaria para todos los ascensos, rebajas, multas o destituciones de los empleados del hospital.

Deberá actuar de farmacéutico cuando no haya otra persona disponible para dichos deberes.

Será responsable de toda la propiedad del hospital y firmará todos los pedidos de nuevas provisiones, materiales, etc. No celebrará compromisos ni hará ningunas compras excepto con la autorización del Director de Sanidad en el caso de hospitales insulares; del tesorero provincial en el caso de hospitales provinciales, o del tesorero municipal en el caso de hospitales municipales; siempre en conformidad con los reglamentos del Agente Comprador Insular.

Deberá preparar y firmar toda la correspondencia oficial referente al hospital y someter los *reports* que le exija el Director de Sanidad.

Deberá ver que se prepara una debida historia clínica de cada enfermo admitido al hospital; que el registro clínico es debidamente extendido y firmado al darse de alta al paciente, y que ese registro queda archivado para futura referencia.

Deberá llevar un *record* de todos los pacientes que piden ser tratados y rehusan permanecer en el hospital después de haber sido aconsejados que se queden por el médico que los ha reconocido.



Deberá ver que todos los certificados de nacimiento y defunción están debidamente extendidos.

#### DEBERES DEL ESCRIBIENTE.

PÁR. 18. Los deberes del escribiente del hospital serán atendidos por el jefe del hospital o por la persona que sea designada por el Director de Sanidad, y dicha persona será responsable de la preparación y seguridad de los *records* del hospital. Deberá observar y hacer que sean observados los reglamentos del hospital y los que se contienen en las leyes y en el Manual del Buró de Sanidad (Art. XVIII, párs. 567 a 588.)

Deberá, bajo la dirección del jefe del hospital examinar personalmente y tomar disposiciones en todas las cuentas, comunicaciones, pedidos y otros papeles referentes a la administración del hospital, y será responsable de toda la correspondencia y *records* del hospital y ver que todo el trabajo de oficina se lleva a cabo debidamente.

Verá que se practican economías y que se mantiene la disciplina entre los empleados; que se mantiene el orden en el hospital; que no hay preferencias en el trato o acomodación de los enfermos; que no se permite sacar del hospital ninguna propiedad excepto bajo las reglas prescritas por el Auditor Insular.

Hará una inspección diaria del hospital y de sus terrenos y ver que los mismos están en condiciones sanitarias y que los reglamentos del establecimiento son puestos en vigor.

Deberá preparar semestralmente para el Director de Sanidad, un *report* de eficiencia de todos los empleados el cual lo firmará el jefe del hospital.

Excepto en caso de urgencia, no incurrirá en ningunos compromisos sin el consentimiento del jefe del hospital, y tales compromisos, cuando los contraiga, deberá reportarlos inmediatamente al jefe.

Deberá tratar de ajustar todas las reclamaciones que reciba de los enfermos.

En caso de pérdida o perjuicios causados a la propiedad del hospital por descuido o negligencia, y se pueda determinar concretamente la responsabilidad por dicha pérdida o quebranto, deberá ver que la persona responsable reembolsa al Gobierno de la misma.

**Preparará las papeletas de admisión de los enfermos admitidos al hospital.**

**Podrá abrir toda la correspondencia oficial del hospital y distribuir la correspondencia para los empleados y enfermos.**

**Tendrá a su cargo, bajo el jefe del hospital, designar los deberes de todos los empleados no clasificados del hospital mientras trabajan fuera del hospital y deberá rendir un *report* de eficiencia de tales empleados siempre que se lo exija el jefe del hospital.**

**Durante la ausencia temporal del jefe del hospital podrá interinar por él en todos los asuntos pertenecientes a la administración propiamente del hospital.**

**Al pedir la admisión, el enfermo será inmediatamente colocado confortablemente en la cama de recepción por la enfermera. El escribiente se cerciorará inmediatamente de que el caso está de acuerdo con las reglas del hospital antes de admitirlo. En caso de un enfermo del Gobierno deberá enviar una notificación de su admisión por escrito al Buró u oficina correspondiente dentro de veinticuatro horas.**

**Será el responsable de la admisión y alta de los pacientes del hospital bajo la dirección del jefe del hospital y de ver que las hojas clínicas están completamente llenadas por el médico antes de archivarlas.**

**En caso de ausentarse durante las horas de oficina, indicará en cuanto sea posible donde se le podrá encontrar en seguida ya por teléfono, mensajero, o de otro modo.**

**Organizará un eficiente ensayo contra incendios para el pronto traslado de los enfermos y la preservación de las propiedades del Gobierno, haciendo ejercicios semanales.**

**Será responsable de todos los deberes que generalmente incumbe a un superintendente de hospital, y será directamente responsable al jefe del hospital.**

**Llenará cuantos otros deberes que se le exija por el jefe del hospital.**

#### **DEBERES DEL ALMACENERO.**

**PÁR. 19. El Director de Sanidad nombrará un almacenero o designará a uno de los empleados del hospital para que actúe como tal.**

El almacenero será directamente responsable de todas las propiedades del Gobierno en el hospital y sus terrenos otorgando adecuados recibos de las mismas.

Hará tales *reports* respecto a la propiedad cuales pidan el Director de Sanidad o el Auditor Insular.

Expedirá recibo de todos los nuevos abastos y equipos recibidos para el hospital.

Inspeccionará todos los suministros del hospital antes de ser recibidos y anotará su estado. Deberá hacer nota de toda propiedad inútil o deteriorada que se reciba.

Llevará un registro de todos los suministros que se expidan.

No permitirá que ninguna propiedad del hospital sea sacada del hospital excepto de acuerdo con las reglas del Auditor Insular.

Los suministros, equipos, etc., del hospital, que no se usan, deberán ser guardados en una habitación bien atrancada, y a ninguno se le permitirá abrir o entrar en tal habitación excepto en presencia del almacenero.

Deberá conservar todos los suministros y equipos inservibles, rotos o inútiles, y semestralmente presentarlos a un inspector de la oficina del Auditor para su disposición y condenación, haciendo un *report* de ello al Auditor.

Verá que todos los utensilios del hospital están debidamente marcados antes de ser expedidos.

Llenará cuantos otros deberes se le asignen por el jefe del hospital.

#### DEBERES DEL CAJERO.

PÁR. 20. El Director de Sanidad designará un cajero para el hospital o un empleado del mismo para que actúe como tal.

Será deber del cajero el recibir todas las cantidades devengadas por el hospital y guardarlas en una caja de seguros provista para ese objeto. Esta caja debe tenerse trancada.

Deberá depositar a crédito del Gobierno, antes del mediodía de los sábados, ante el depositario que le sea designado, todos los fondos recaudados durante la semana; a condición de que si la cantidad total en caja excediera de ₡200 en cualquiera ocasión, debe hacer depósitos más frecuentes.

Los derechos de hospital se pagarán ordinariamente al

contado o por adelantado. Ordinariamente no se concederán créditos excepto a personas cuya responsabilidad sea indiscutible, o a empleados del Gobierno.

El cajero deberá enviar sus cuentas para ser recaudadas el 1.º de cada mes. Las que no estén pagadas el día 15 serán reportadas al jefe del hospital para su resolución. En el caso de empleados del Gobierno, las cuentas por servicios serán remitidas, por conducto del Director de Sanidad, al respectivo Jefe de Buró para el cobro.

No se podrá exigir al cajero que salga del hospital para cobrar cuentas. Las cuentas deben ser pagaderas en la oficina del hospital, pero el cajero habrá de tomarse todo el cuidado y usar todos los medios razonables para cobrar las cuentas atrasadas.

Preparará y pagará las cuentas por servicios prestados al hospital y verá que tales cuentas, antes de pagarlas, corresponden en su detalles con los servicios prestados.

En caso de ausencia durante las horas de hospital, indicará en cuanto sea posible donde se le podrá encontrar por teléfono, mensajero, o de otro modo.

Será directamente responsable al jefe del hospital.

Cobrará por todas las recetas, vendajes, etc., facilitados por el hospital.

Llenará cuantos otros deberes se le exijan por el jefe del hospital.

#### DEBERES DEL FARMACÉUTICO.

PÁR. 21. Los deberes del farmacéutico serán llenados por el jefe del hospital o por un farmacéutico debidamente calificado designado por el Director de Sanidad. El farmacéutico será directamente responsable al director del hospital.

Tendrá a su cargo todos los empleados de la farmacia.

Preparará y despachará todas las recetas que sean presentadas entre 8 a. m. y 12 m. y de 3 a 6 p. m., y a cualquiera otra hora que lo requieran las exigencias del servicio.

Hará los pedidos de artículos medicinales que pertenecen a su departamento, y será su deber el ver que hay bastantes existencias a mano para afrontar las demandas ordinarias del hospital hasta la llegada de nuevas remesas.

Será responsable de la limpieza y buen estado de la farmacia en general y deberá mantener esta a la misma altura que se exige de una farmacia de primera clase.

Los médicos que envíen recetas que contienen artículos no incluidos en la lista aprobada por el Director de Sanidad deberán ser avisados que si quieren que las mismas se despachen deben facilitar los ingredientes por su propia cuenta. Ninguna receta será redespachada excepto por orden del mismo recetante. Excepto para casos del hospital, no se expedirán medicinas mas que por medio de recetas.

Ejercerá la mayor economía en despachar las recetas y ordinariamente solo deberá facilitar una cantidad suficiente de medicina que dure cinco días. En caso de que se pida una cantidad mayor en la receta, será su deber el llamar la atención del médico a esta regla. Si el médico desea una cantidad mayor de medicina, entonces le será facilitada.

Deberá llenar cuantos otros deberes se le exijan por el jefe del hospital.

#### DEBERES DEL MÉDICO RESIDENTE.

PÁR. 22. Cualquier médico de buena reputación podrá ser destinado por el Director de Sanidad como médico residente (a condición de que apruebe primeramente un examen profesional que a discreción del Director de Sanidad sea necesario). En el caso que los servicios lo exijan, dos o más médicos residentes podrán ser destinados a un mismo hospital. El médico residente será responsable al jefe del hospital y cumplirá con los deberes que se le asignen por el jefe.

Deberá visitar a cada uno de los enfermos bajo su cargo cada mañana y tarde y con más frecuencia como sea necesario, y asistirá a todo enfermo nuevo tan pronto como sea posible después de la admisión, preparando una historia clínica del paciente. Si el enfermo está en estado grave, deberá, si es factible, notificar inmediatamente al efecto al jefe del hospital.

Deberá inmediatamente aislar los casos contagiosos e infecciosos.

Deberá anotar en la hoja clínica el estado en que se encontraba después de las curas quirúrgicas y deberá com-

pletar toda la historia clínica, diagnóstico, estado al darse de alta, etc., de todos los enfermos antes de despedirlos del hospital.

No se ausentará del hospital excepto con permiso del jefe del hospital, y entonces dejará la dirección en que se le pueda encontrar por mensajero, teléfono o de otro modo.

No tendrá ninguna jurisdicción correctiva sobre los empleados del hospital sino que deberá participar todas sus faltas e irregularidades al jefe del hospital para la atención de éste.

Las órdenes concernientes a los enfermos deberán ser asentadas en las hojas clínicas.

Facilitará al escribiente los datos necesarios para redactar debidamente los certificados de nacimiento y defunción y para la preparación de cualesquiera documentos profesionales que se le exijan y la debida preparación de certificados facultativos concernientes a los enfermos que han estado bajo su cuidado, y todos esos *records* serán firmados por el jefe del hospital. En casos de urgencia, sin embargo, tales documentos podrán ser firmados por el médico residente.

Excepto en casos de urgencia no practicará ninguna operación ni tomará medidas extraordinarias sin la concurrencia del jefe del hospital.

No practicará reconocimientos ginecológicos excepto en presencia de una enfermera.

Será responsable de la clínica externa y verá que todos los reglamentos de dicho servicio son cumplimentados.

Cuando no esté de otra manera ocupado deberá administrar, si es necesario, anestésicos.

No podrá recetar para los empleados del hospital excepto como se le ordene por el jefe del hospital.

Cumplimentará todas las órdenes del hospital respecto al bienestar y tratamiento de los enfermos, y deberá investigar y aconsejar respecto a los *reports* de las enfermeras en cuanto a las necesidades del hospital.

Antes de asumir sus deberes deberá familiarizarse con los reglamentos del hospital y firmar una declaración de que ha leído los mismos y que cumplirá con sus deberes y observar las reglas dispuestas para él.

Bajo ningunas circunstancias se permitirá al médico residente recibir honorarios, directa o indirectamente, por servicios profesionales ya prestados o por prestarse más adelante en el hospital. Los médicos residentes que infrinjan esta regla quedarán expuestos a inmediata expulsión del servicio.

No dará ningún certificado o manifestación respecto al estado de cualquier enfermo del hospital excepto cuando haya sido específicamente autorizado para ello por el jefe del hospital.

Hará los reconocimientos de laboratorio que le exija el jefe del hospital.

#### DEBERES DE LA JEFE ENFERMERA.

PÁR. 23. La jefe enfermera será destinada al cargo por el Director de Sanidad.

Tendrá a su cargo todas las demás enfermeras destinadas al hospital y todos los empleados no clasificados adscritos a los enfermos y residentes del hospital.

Podrá ser destinada como escribiente del hospital siempre que el Director de Sanidad considere esto en bien de los intereses del servicio.

Será responsable del bienestar general de los enfermos y de la administración de las salas, el domicilio de las enfermeras y las habitaciones de las alumnas enfermeras.

Será responsable de la limpieza y debidas condiciones higiénicas del interior del hospital. Deberá ver que se toman prudentes precauciones y se repara debidamente la ropa y las propiedades del hospital.

Será personalmente responsable de la supervisión de la lavandería.

Todas las enfermeras y empleados bajo su supervisión se le presentarán diariamente. Sujeto a la aprobación del jefe, les asignará sus horas y deberes.

Estará encargada de la instrucción de las alumnas enfermeras y vigilará su conducta y bienestar en general.

Hará un inventario mensual de toda la ropa y otras propiedades y participárselo al almacenero.

Será directamente responsable al jefe del hospital.

## DEBERES DE LA DIETISTA.

PÁR. 24. La jefe enfermera u otra enfermera disponible podrá ser asignada por el Jefe del Hospital como dietista.

Tendrá *control* directo de los cocineros y servidumbre empleada en la cocina y deberá participar cualquier desobediencia de órdenes a la jefe enfermera quien lo reportará al jefe del hospital para que sea disciplinado.

Además de sus deberes como dietista, se le podrá exigir que asuma otros deberes según ordene el jefe del hospital.

Ella hará los menús diarios para los enfermos de acuerdo con las reglas dietéticas aprobadas, y los menús para los empleados y los someterá al jefe del hospital o al médico residente si éste está al cargo, quien los modificará, si es necesario, y aprobará y enviará al escribiente para la compra. Estos menús deben ser sometidos al escribiente con doce horas de anticipación a la hora en que han de ser servidos.

Hará los pedidos diarios de provisiones, los cuales serán llevados a la oficina para su aprobación y asiento antes de las 5 p. m. cada día.

Deberá ver que las comidas se preparan y son servidas a las horas dictadas por el jefe del hospital. Debe ver que dichas horas son estrictamente observadas y reportará cualquier demora de funcionarios o empleados.

Será responsable de la limpieza de la cocina, despensas, refrigeradores y comedores.

Será responsable de la debida disposición de la basura y de la limpieza de las latas de basura.

Visitará a todos los enfermos de pago una vez al día para preguntarles sobre sus preferencias que puedan ser factibles a su estado en cuestiones de dieta. Visitará todas las salas diariamente y consultará a la jefe enfermera respecto a la dieta de los enfermos.

Reportará todos los defectos en el equipo de su departamento a la jefe enfermera quien lo participará al jefe del hospital.

Hará un inventario mensual de toda la propiedad de su departamento haciendo un *report* del mismo al almacenero.

Ella tendrá a su cargo la enseñanza de la dietética a las alumnas enfermeras mientras ellas están a su cuidado.



Será directamente responsable a la jefe enfermera por el fiel cumplimiento de sus deberes.

#### DEBERES DE LAS ENFERMERAS.

PÁR. 25. A. *Enfermeras encargadas de día.*—La enfermera de cada sala será responsable del cumplimiento de las reglas de la sala, la preparación de inventarios, el cuidado personal de los enfermos, la limpieza de la sala, habitaciones y corredores adyacentes, y del equipo y mobiliario.

Será responsable de la conducta de las enfermeras y los enfermos, de la pronta y exacta ejecución de las órdenes del médico, de llevar eficazmente las hojas clínicas al lado de las camas, del cuidado de las propiedades del hospital, así como de la ropa del paciente, y el debido servicio de las dietas de los enfermos bajo su cuidado.

La enfermera encargada de día hará rondas con las enfermeras entrantes de noche con las enfermeras salientes por la mañana.

Participará a la jefe enfermera cualquier causa de queja durante tales rondas. Deberá dar completa información a dichas enfermeras respecto al estado de los enfermos, las provisiones y cosas necesarias, etc.

La enfermera de día deberá hacer un *report* completo por escrito a la enfermera de noche respecto al estado de los enfermos, conducta de los empleados, efectos necesarios, uso de los mismos, y reparaciones necesarias. Deberá leer a la enfermera de noche su *report* y darla las explicaciones necesarias respecto a las medidas u órdenes.

La enfermera encargada de día dará parte a la jefe enfermera diariamente, antes de las 8 a. m. de cualquier cosa que se necesite para el mejor servicio y buen orden de la sala.

Dará parte a la jefe enfermera de cualquier descontento entre los enfermos y cualquier falta de cortesía o ineficacia que hayan demostrado los empleados de su sala.

Será responsable del aseo y limpieza de los empleados de su sala y de la económica administración y supervisión general de la misma.

Excepto en casos de urgencia, verá que todos los empleados de su sala son puntuales a las comidas.

Será directamente responsable de los servidores y les designará sus respectivos deberes.

Verá que el armario de medicinas está atrancado, que las medicinas están dentro, y guardará la llave. Verá que una bandeja hipodérmica debidamente equipada está constantemente lista para ser usada inmediatamente.

Deberá reportar directamente a la jefe enfermera o al jefe del hospital.

B. *Enfermera de noche*.—La responsabilidad de la enfermera de noche comprenderá un período de doce horas diarias, desde 7 p. m. a 7 a. m. de la mañana siguiente. Será responsable del cuidado y bienestar de los enfermos, de la administración de las salas, y de la conducta de los empleados durante las horas de servicio.

Hará un *report* por escrito a la jefe enfermera cada mañana y un *report* verbal además si es necesario.

Tendrá con ella, mientras está de servicio, las llaves del armario de urgencia, de la ropería y despensas, y deberá reportar todos los días a la jefe enfermera los efectos que han sido usados.

Verá que las enfermeras y empleados no se duermen mientras están de servicio.

Verá que la cena de media noche es debidamente preparada y servida para los que tienen derecho a ella, y que los visitantes salen prontamente a las 8 p. m., que todos los enfermos se han acomodado confortablemente para la noche, que la sala está tranquila y silenciosa para el necesario descanso de los enfermos.

Atenderá a la admisión de todos los enfermos durante la noche y prestará todos los auxilios necesarios, llamando al médico residente en caso de urgencia.

Será responsable del pronto y exacto cumplimiento de todas las órdenes expedidas por los médicos y de llevar las hojas clínicas.

#### REGLAS GENERALES PARA LOS ENFERMOS.

PÁR. 26. Los enfermos que deseen ausentarse del hospital deberán obtener permiso por escrito del médico de o cirujano cabecera durante las rondas ordinarias matutinas. Los pases se deberán presentar en la oficina por el enfermo en persona antes de salir del hospital. Se seguirán cobrando los derechos ordinarios por el hospital mientras el

enfermo esté fuera del mismo ausente con pase. Excepto bajo circunstancias extraordinarias no se expedirán pases permitiendo ausentarse entre 8 p. m. y 8 a. m. El enfermo con pase deberá presentarse a la oficina al volver al hospital para hacer que se cancele su pase.

#### EFFECTOS Y ROPAS.

PÁR. 27. El hospital no será responsable de dinero o efectos a menos que estos sean entregados al escribiente para que los deposite en la caja de seguros expidiendo un recibo de ellos al enfermo. En caso de fallecimiento de un enfermo del Gobierno, el escribiente notificará al Fiscal provincial por conductos oficiales los valores y efectos personales que haya dejado a su cargo el difunto, y si este es un ciudadano particular, dichos valores y efectos deben ser entregados a la familia o parientes.

#### PRECAUCIONES CONTRA LAS PÉRDIDAS.

PÁR. 28. Se tomarán todas las precauciones razonables para evitar la pérdida de efectos y ropas del enfermo, más el hospital no será responsable de la destrucción de la ropa por insectos, desinfectantes, incendio u otras causas.

#### FUMAR, JUGAR, ETC.

PÁR. 29. No se permitirá fumar, jugar, hablar en voz alta, perjurar, lenguaje obsceno, u otras perturbaciones del orden, o escupir excepto en los receptáculos destinados para el objeto. Los enfermos no deberán abandonar el hospital con efectos del hospital en su poder. Será deber de las enfermeras el hacer cumplir estas reglas.

#### QUEJAS.

PÁR. 30. Los enfermos que tengan reclamaciones que hacer deben pedir el libro de reclamaciones en el que escribirán su queja fechada y firmada. Este libro de reclamaciones se enviará a la oficina del escribiente tan pronto como sea posible después que el enfermo haya asentado la reclamación. El escribiente pondrá sus iniciales a la queja para demostrar que la ha leído y devolverá el libro a la sala para satisfacción del enfermo. Todas las reclamaciones deben

ser atendidas, en cuanto sea posible, por el escribiente y en caso de que esto no sea factible el enfermo debe apelar al jefe del hospital. El jefe del hospital deberá examinar el libro de reclamaciones siempre que haga falta.

#### EXTINCIÓN DE INCENDIOS.

PÁR. 31. Se darán instrucciones para la extinción de incendios y se practicarán ejercicios por los empleados a horas inesperadas por orden y bajo la dirección del escribiente.

#### RECONOCIMIENTOS DE LABORATORIO.

PÁR. 32. Las muestras de orina, etc., de los que tengan derecho a reconocimientos gratuitos serán enviadas al laboratorio acompañadas de un modelo apropiado del laboratorio firmado por el médico que pide el reconocimiento. Los *reports* de tales reconocimientos deben ser asentados en el libro de laboratorios y el *report* original inmediatamente enviado al médico que pidió el reconocimiento. Los empleados del Gobierno que emplean médicos particulares en su domicilio no tendrán derecho a reconocimiento gratuito por el laboratorio del hospital.

#### SISTEMA MÉTRICO.

PÁR. 33. Se usará el sistema métrico en todos los asuntos relacionados con el hospital, inclusive las recetas.

#### TRASPORTE.

PÁR. 34. Los funcionarios y empleados que tengan ocasión de usar transporte para fines oficiales deberán pedirlo por escrito al escribiente.

#### ÓRDENES PERMANENTES.

PÁR. 35. Las órdenes del hospital serán expedidas por el jefe del hospital.

#### REGLAS GENERALES PARA LOS EMPLEADOS.

PÁR. 36. Ninguna enfermera o asistente empleará más de media hora en cada comida. No se permitirá que los empleados se sirvan las comidas en cualquier otro comedor del hospital que el que se les haya destinado. Los empleados serán destinados a comedores por el jefe del hospital.

Todos los empleados deben ser puntuales a la comida excepto en casos de tardanza inevitable.

Los médicos, enfermeras y otros empleados que tengan huéspedes deberán notificar al cajero, quien les cobrará una tarifa de 75 centavos por cada comida extraordinaria servida.

Toda falta de etiqueta será participada al jefe del hospital por la persona que la observe.

#### UNIFORMES Y CHAPAS.

PÁR. 37. Los uniformes, chapas, etc., de los médicos, enfermeras y demás empleados del hospital deberán atenerse a los requisitos del Servicio de Sanidad de Filipinas o a los que por orden especial se exijan por el Director de Sanidad. Los empleados deberán usar el uniforme oficial mientras estén de servicio.

#### CUIDADO DE LA ROPA DE LOS ENFERMOS.

PÁR. 38. Al ser admitido un enfermo a una sala, la enfermera al cargo hará un inventario de todos sus efectos personales y asentar dicha lista en el libro de ropas destinado al objeto, fechando y firmando el asiento. Una lista duplicada, fechada, y firmada, se unirá a la ropa, la cual deberá ser bien atada en un bulto, desinfectada si es posible, y enviada a la oficina del escribiente que la depositará en una ropería destinada para dicho objeto en el hospital. Cuando se da de alta a un enfermo le serán devueltos sus efectos debiendo hacer recibo de los mismos firmando la lista en el libro de ropas. Al fallecimiento de un enfermo, se dispondrá de sus efectos como se provee en el párrafo 27.

Los enfermos de sala deberán usar el traje del hospital durante su permanencia en el mismo.

#### ÓRDENES Y LIBROS DE ÓRDENES.

PÁR. 39. No se exigirá a ninguna enfermera o sirviente, en cuanto sea posible, que atienda órdenes verbales para el tratamiento de enfermos, excepto órdenes menores o de extrema urgencia en presencia del enfermo. Todas las órdenes deben escribirse en el libro de sala destinado para el objeto. Si en caso de urgencia el médico se vé obligado a

enviar la orden a la sala escrita en un pedazo de papel, este será pegado al libro de órdenes en su lugar correspondiente. Todas las órdenes, o grupos de órdenes deberán llevar la fecha, hora, y firma del médico. Después que una orden haya sido ejecutada será contrasignada en tinta con el nombre de la enfermera que la llevó a cabo. Las órdenes permanentes no serán suspendidas o revocadas hasta que la palabra "Suspendido" se escriba a través de la orden con la firma del médico que la suspende o revoca. La enfermera que reciba una orden verbal debe llamar respetuosamente la atención del médico a esta regla.

#### ARMARIOS DE MEDICINAS Y VENENOS.

PÁR. 40. Los armarios de medicinas, con las medicinas dentro, deben conservarse atrancados y la llave puesta fuera del alcance de personas no autorizadas. Las medicinas serán despachadas únicamente por la enfermera al cargo de la sala o bajo su inmediata dirección.

#### INFORMES SOBRE LOS ENFERMOS.

PÁR. 41. Todas las enfermeras, sirvientes y otros empleados, se les prohíbe dar informes a los enfermos o a otras personas respecto a los métodos de tratamiento, recetas, medicinas recetadas, resultados de reconocimientos del laboratorio, temperaturas, y asuntos análogos. Todas las averiguaciones de los enfermos y sus amigos respecto a tales asuntos deben ser referidas al médico encargado del caso. Los *records* clínicos de los casos deben estar bajo la custodia de la enfermera encargada de la sala en donde el paciente es tratado. La enfermera encargada no permitirá a ninguna persona ver el *record* clínico más que al médico encargado del caso. El médico residente firmará todos los *records* excepto los de enfermos particulares antes de despedir al enfermo y después de haber examinado dichos *records* los colocará en un sobre sellado y dirigido al jefe del hospital, si se halla presente. Será el deber del jefe del hospital, si se halla presente, el inspeccionar todos esos *records* recibidos por él y ver que quedan protegidos del escrutinio de personas no autorizadas. Si el jefe del hospital no se halla

presente, el médico residente enviará el *record* completo al escribiente. El jefe del hospital escrutinará todos dichos *records* a su vuelta al hospital. El caso deberá ser enviado a la oficina del jefe por lo menos una hora antes de la alta del enfermo.

#### ENFERMOS MUY GRAVES.

PÁR. 42. La enfermera encargada de un enfermo que desee conversar con un representante de una denominación religiosa pedirá al escribiente que envíe por la persona escogida por el enfermo para asistirle, disponiendo su debida reclusión para durante la visita de dicha persona de modo que no moleste a los demás enfermos.

#### PEDIDOS DE EFECTOS.

PÁR. 43. El almacenero preparará los pedidos de todos los efectos. Dichos pedidos serán revisados por el escribiente y firmados por el jefe del hospital. Todos los efectos generales se deberán tener almacenados en el almacén de provisiones bajo el cargo directo del almacenero quien será responsable de ellos al jefe del hospital. Las enfermeras, dietista, y otros empleados autorizados podrán hacer pedidos de efectos en los días que sean designados por el jefe del hospital. Dichos pedidos se escribirán en un libro de pedidos con lápiz indeleble o con tinta, fechados y firmados por la persona que los hace. Toda propiedad inservible deberá asimismo ser cambiada al mismo tiempo, asentándola debidamente en el libro de pedidos bajo la palabra "Canje" y bajo recibo del escribiente. Todos los artículos para el canje deben ser llevados al almacén bien limpios. Las enfermeras serán directamente responsables del cumplimiento de esta regla. Bajo ningunas circunstancias se deberá tirar ninguna propiedad del hospital que esté rota o inservible. Todo debe ser devuelto al almacén para ser oficialmente condenado. Los libros de pedidos deben ser enviados directamente a la oficina del almacenero quien los visará antes de entregar los efectos.

La despensa deberá estar abierta diariamente a las horas que disponga el jefe del hospital. Todas las provisiones serán pedidas por la dietista por lo menos con doce horas de

anticipación. Dichos pedidos deben de ser visados por el almacenero cuando entregue las provisiones. No se abrirá la despensa bajo ningunas circunstancias excepto por o en presencia del almacenero. Los empleados que pidan efectos deben inspeccionar los mismos al recibirlos, y todos los artículos pedidos y que se hayan recibido pero no recibido se anotarán en el libro de pedidos dando parte de ello al almacenero inmediatamente.

#### ROPA Y LAVADA.

PÁR. 44. Toda la ropa será guardada en las habitaciones destinadas para el objeto. La ropa limpia deberá ser cuidada y guardada para la persona destinada a ello; la ropa sucia se pondrá en los receptáculos destinados para dicho objeto. La ropa que usen los enfermos deberá ser bien desinfectada y oreada antes de enviarla al ropero. Deberá hacerse un inventario de toda la ropa cada mes en el día designado por el jefe del hospital.

#### DESCONTENTO DE LOS EMPLEADOS.

PÁR. 45. Siempre que uno de los miembros facultativos, o cualquier empleado del hospital se sienta perjudicado por algún motivo relacionado con su trabajo, o esté descontento de la designación que se le haya dado, deberá manifestar sus razones por escrito al jefe del hospital quien deberá, previo suficiente aviso, dar una audiencia a todos los interesados y decidir la cuestión pendiente. En los casos exclusivamente dentro de la jurisdicción del servicio civil, deberá remitir la correspondencia a dicho Buró por medio de los conductos oficiales.

#### COMUNICACIONES OFICIALES.

PÁR. 46. Todas las comunicaciones oficiales al Director de Sanidad o a cualquier ramo del Gobierno serán remitidas por conducto del jefe del hospital, y a menos que no sean así remitidas no se deberá tomar ningún acuerdo.

#### INFLUENCIA POLÍTICA.

PÁR. 47. Es conveniente para los intereses del servicio que las influencias políticas no intervengan en la adminis-



tración del hospital. Se advierte a los empleados del hospital que no busquen, directa o indirectamente, cualquier influencia política respecto a sus servicios o a los de otro mientras están relacionados al hospital. La desobediencia de este párrafo deberá ser participada al Director de Sanidad para la aplicación de las medidas disciplinarias que en el caso se requieran.

# SUPPLIES AND EQUIPMENT.

## HOSPITAL EQUIPMENT.

### LIST No. 1.

(The Kny-Scheerer Company, "S.")

Page.	No.	Articles.	Unit.	Number of beds.				Unit price.
				6	12	20	50	
139	2842-S	Bags, hot water .....	Number	3	6	20	50	\$2.50
		Basins, enameled, 14 inches diameter, 4 inches deep .....	do	3	4	6	12	.70
		Basins, enameled, 20 inches diameter, 4 inches deep .....	do	3	4	6	6	.80
		Basins, kidney, enameled .....	do	1	1	2	2	.60
		Baskets, waste paper .....	do	1	2	3	4	.30
		Beater, egg .....	do	1	1	1	1	.70
		Bedstead, 3-piece form, head end 52 inches high, foot end 40 inches high; woven fabric, 27 inches high with 3-pin corner lock, width 36 inches .....	do	6	12	20	50	20.00
		Bedstead, with Gacht's adjustable spring (peritonitis bed) .....	do			1	2	50.00
		Boilers, instrument, enameled, 24 by 8 by 5 inches .....	do	1	1	2	2	5.00
		Boilers, utensil, 20 inches deep, 20 inches diameter .....	do			1	1	5.00
140	2845-S	Bowls, sugar .....	do	12	18	30	60	4.00
		Brooms, bamboo .....	do	2	2	4	8	.60
		Brushes, hand .....	do	2	2	6	10	2.70
		Brushes, scrubbing .....	do	4	4	8	8	.30
		Cabinet, instrument .....	do	4	4	6	6	.35
		Cabinet, instrument .....	do	1	1			150.00
		Cans, galvanized iron, with faucet, 10-gallon .....	do			1	1	400.00
		Cans, galvanized iron, with faucet, 20-gallon .....	do	2	2			6.00
		Cans, garbage, galvanized iron 20-gallon .....	do			3	6	10.00
		Caps, ice .....	do	2	2	3	6	6.00
72	1662-S	Chairs, King's County patent, Hemobyne .....	do	2	4	10	20	2.50
		Chairs, King's County patent, Hague .....	do			1	1	15.00
		Chairs, rocking, King's County hospital patent, Hemobyne .....	do			2	2	18.00
		Chairs, rolling .....	do			2	4	30.00
		Chamber, enamel .....	do			1	2	35.00
		Clocks .....	do	3	4	6	6	1.40
		Containers, pepper .....	do	1	1	2	2	8.00
		Containers, salt .....	do	3	6	10	20	.30
		Containers, soiled linen, bamboo .....	do	3	6	10	20	.20
		Cups, enameled .....	do	1	1	2	3	4.00
130	2608-S	Cups, specimen .....	do	12	18	30	60	.85
		Cuspidors, enameled .....	do	6	12	20	50	.25
		Dippers .....	do	6	12	20	50	1.80
		Extinguishers, fire, Underwriters No. 5 .....	do	1	1	2	2	.20
		Filter, Berkefeld .....	do	3	6	10	20	25.00
		Forks .....	do	1	1	1	1	25.00
		Forks, big .....	do	12	24	40	100	.06
		Glasses, drinking .....	do	1	1	1	1	.30
		Glasses, looking, 12 by 20 inches .....	do	12	24	40	100	.15
		Glasses, medicine .....	do	2	2	3	4	3.50
131	2615-S	Gloves, rubber, No. 6 1/2 .....	Dozen	6	12	20	50	.25
		Gloves, rubber, No. 7 1/2 .....	do			1	4	.75
		Grinder, meat .....	do			1	4	.80
		Ice box, 24 by 24 by 24 inches (where ice is available) .....	Number	1	1	1	1	7.50
		Ice box, 46 by 40 by 24 inches (where ice is available) .....	do	1	1			16.00
		Ice box, 46 by 40 by 24 inches (where ice is available) .....	do			1	1	20.00

## Hospital equipment—Continued.

Page.	No.	Articles.	Unit.	Number of beds.				Unit price.
				6	12	20	50	
		Irrigators, enameled, 2-liter.....	Number	2	2	6	10	\$2.50
		Jars, glass, with lids, 10-inch.....	do	4	4	6	8	2.70
		Kettles, stew, 3-gallon, enameled.....	do	2	2	4	6	5.00
		Kettles, tea.....	do	1	1	1	1	2.50
		Knives.....	do	12	24	40	100	.04
		Knives, butcher's.....	do	1	1	2	3	.30
		Lamps, alcohol.....	do	2	2	6	6	.20
		Litters, "The U. S. Army" model.....	do	2	2	3	4	2.00
		Mattresses, hair, to fit bedsteads.....	do	6	12	20	50	25.00
		Mills, coffee, small.....	do	1	1			3.00
		Mills, coffee, large.....	do			1	1	20.00
		Mops.....	do	2	2	6	10	.30
		Pads, Kelly.....	do	1	1	2	2	5.00
		Pails, galvanized iron, 5-gallon.....	do	2	2	4	10	2.50
		Pans, bed.....	do	2	3	6	6	3.00
		Pans, bread.....	do	1	1	2	2	.40
		Pans, dish.....	do	1	1	2	2	.45
		Pans, frying.....	do	1	1	2	2	.80
		Pitchers, enameled, 2-liter.....	do	2	2	4	6	1.50
		Pitchers, small, enameled 6 inches high.....	do	1	1	2	2	.85
		Pillows, hair.....	do	12	24	50	100	2.00
		Plates, butter.....	do	3	6	10	20	.15
		Plates, dinner.....	do	12	18	30	60	.20
		Plates, small.....	do	12	18	30	60	.10
		Pots, coffee, enameled, 4-liter.....	do	1	1	1	1	1.40
		Pots, coffee, enameled, 8-liter.....	do		1			2.80
		Pots, coffee, enameled, 12-liter.....	do			1	1	3.50
		Pots, potato.....	do	1	1	1	1	2.50
		Pots, rice.....	do	1	1	1	1	2.50
		Pots, tea, 4-liter.....	do	1	1	1	1	1.40
		Pots, tea, 12-liter.....	do	1	1	1	1	3.50
		Range, 4 holes.....	do	1	1			70.00
		Range, 6 holes.....	do			1		90.00
		Range, 8 holes.....	do				1	130.00
		Rollers, bread.....	do	1	1	1	1	2.50
		Saucers.....	do	12	18	30	60	.10
116	2244-S	Screens, improved folding patent, 96 inches long, 66 inches wide, 3 set.....	Sets	1	1	4	8	30.00
		Spoon, soup.....	Number	1	1	1	1	.50
82	1834-S	Stand, basin, single, enameled.....	do	2	2	4	6	9.00
80	1785-S	Stand, irrigator, enameled.....	do	1	1	2	4	6.00
57	1496-S	Stand, instrument, Mayo's, enameled.....	do	1	1	1	1	20.00
87	1880-S	Stand, immersing, steel porcelain.....	do			1	1	28.00
		Stand, test tube, wooden.....	do	1	1	2	2	1.50
		Sterilizer, steam, Arnold, inside dimension 12½ inches, 11 inches diameter.....	do	1	1	2	2	20.00
		Stone, grind, circular, 1-foot diameter.....	do			1	1	10.00
		Stools, revolving seats.....	do			2	2	8.00
		Stools, closet.....	do	2	2	4	4	18.00
		Strainers, soup.....	do	1	1	1	1	.50
		Strainers, tea.....	do	1	1	1	1	.40
		Table, bedside, enameled, 16 by 16 by 30 inches.....	do	1	1	1	1	17.00
		Tables, bedside, wooden, made in Manila, 16 by 16 by 30 inches.....	do	6	12	20	50	7.00
53	1430-S	Tables, instrument and dressing, iron, enameled, 24 by 36 inches.....	do	1	1	3	4	180.00
20	1143-45-S	Tables, operating.....	do			1	1	57.00
37	1225-S	Tables, operating.....	do	1	1			80.00
		Tablespoons.....	do	12	24	40	100	.06
		Teaspoons.....	do	12	24	40	100	.03
		Toaster, bread.....	do	1	1	1	1	.60
		Trays, enameled, 22 by 17 inches.....	do	6	12	20	50	.60
		Tubes, rectal.....	do	1	1	2	4	.90
		Turn-overs.....	do	1	1	1	1	2.00
		Typewriters.....	do			1	1	160.65
		Urinals.....	do	4	4	12	12	2.00

## HOSPITAL EQUIPMENT.

LIST No. 2.

Articles.	Unit.	Number of beds.				Unit price.
		6	12	20	50	
Axes .....	Number	1	1	1	1	P1.20
Bolos .....	do	1	1	1	1	.50
Bookcases, sectional, made in Manila:						
40 by 12 by 12 inches .....	Section	2	2	3	4	20.00
Base for above .....	Number	1	1	1	1	8.00
Top for above .....	do	1	1	1	1	6.00
Burners, Primus, No. 2 .....	do	1	1	2	2	6.00
Burners, Primus, No. 3 .....	do	1	1	2	2	30.00
Chairs, office, arm, wooden .....	do	6	12	20	30	3.50
Chairs, office, arm, wooden, revolving .....	do			1	1	15.00
Chisels, 1-inch, carpenters .....	do	1	1	1	1	.75
Chisels, 2-inch, carpenters .....	do	1	1	1	1	1.00
Desks, office, approximate, 28 by 46 inches .....	do	1	1			60.00
Desks, office, approximate, 31 by 60 inches .....	do			1	1	95.00
Files, record, The Globe Wenick Co. ....	do	2	2	6	12	40.00
Hatchets .....	do	1	1	1	1	1.20
Lamps, hanging (petroleum) .....	do	1	2	4	6	8.00
Lamps, stand (petroleum) .....	do	4	4	8	12	3.50
Mallet, carpenter's .....	do	1	1	1	1	.50
Plane, jack, carpenter's .....	do	1	1	1	1	4.00
Rules, wooden .....	do	1	1	2	2	.30
Saw, carpenter .....	do	1	1	1	1	5.00
Square, carpenter's .....	do	1	1	1	1	2.50
Stools, wooden, 11.5-inch diameter top, 22-inch high .....	do	2	2	4	4	10.00
Tables, wooden, 31 by 46 inches, with drawers .....	do	3	3	4	6	7.00
Tables, wooden, 36 by 18 by 31 inches, with 2 drawers .....	do	1	2	4	6	8.00
Tables, typewriter, 36 inches long, 20 inches wide, 27 inches high .....	do			1	1	19.00

## HOSPITAL SUPPLIES.

Articles.	Unit.	Number of beds.				Unit price.
		6	12	20	50	
Bandage, 2 inches wide	Dozen	20	30	40	60	\$1.60
Bandage, 3 inches wide	do	20	30	40	60	1.00
Bandage, 3½ inches wide	do	20	30	40	60	1.20
Baskets, letter	do			2	2	.30
Blotters, hand	Number			2	2	.75
Books, blank, cap, 4-quire	do	1	1	2	4	.40
Blankets, white cotton	do	12	18	30	60	1.25
Blankets, white cotton, extra for Mountain Hospital	do	12	18	30	60	1.25
Blankets, woolen	do	4	6	10	24	1.05
Blankets, woolen, extra for Mountain Hospital	do	4	6	10	26	1.05
Camisas	do	10	12	35	50	1.20
Caps, operating, doctor's	do	2	2	6	8	.50
Caps, nurse's	do	6	6	12	12	.50
Cards, blank, 4 by 6 inches	Thousand	½	½	½	½	1.30
Cards, blank, 5 by 10 inches	do	½	½	½	½	1.50
Cases, pillow	Number	50	100	150	200	.35
Catgut, No. 1, sterilized	Tubes	10	10	20	40	.08
Catgut, No. 3, sterilized	do	10	10	20	40	.08
Clips, paper	Boxes	1	1	2	2	.15
Cotton	Rolls	6	10	20	40	.45
Coats, Pajama	Number	20	24	60	100	.55
Cloths, wash	do	12	24	50	100	.10
Envelopes, official, large	Thousand	½	½	½	½	3.50
Erasers, rubber	Number	1	1	2	2	.06
Erasers, steel	do	1	1	2	2	.35
Fasteners, paper	Boxes	1	1	2	2	.15
Gauze, for dressings	Meters	10	20	60	100	.06
Gowns, operating	Number	2	2	6	8	5.00
Gut silk worm, coarse	Boxes	2	2	4	4	.65
Ink, carmine	100 c. c.	1	1	2	2	1.65
Ink, writing	Liter	1	1	2	2	1.00
Inkstands, double	Number	1	1	4	6	1.20
Muslin, bleached	Bolt	1	1	1	2	8.00
Muslin, unbleached	do	1	1	1	2	11.00
Napkins, table	Number	18	18	36	48	.40
Nets, mosquito	do	12	24	50	100	5.00
Pads, prescription	do	10	10	24	50	.15
Pads, scratch, T. W. Size	do	4	6	18	18	.06
Pants, pajama	do	20	24	60	100	.55
Paper, blotting	Sheets	6	6	12	24	.06
Paper, typewriter, long	Boxes			1	1	1.90
Paper, typewriter, short	do			1	1	1.00
Paste, library	Jars	1	1	2	4	.45
Pencils, lead	Dozen	1	1	4	8	.36
Penholders	Number	6	6	12	12	.02
Pen points	Boxes	1	1	4	4	.75
Petroleum	Cases	12	12	24	24	3.80
Pins	Cones	2	2	6	12	.09
Pins, safety, assorted	Dozen	3	3	6	6	.08
Robes, bath	Number			2	3	7.00
Sheets, bed, large, to fit beds	do	30	60	150	300	1.50
Sheets, draw, to fit beds	do	25	50	100	200	1.50
Sheets, operating	do	2	2	6	6	1.50
Sheeting, rubber	Meter	4	6	10	10	1.65
Soap, ivory	Cakes	24	48	100	200	.08
Soap, laundry	do	24	48	100	200	.30
Sutures, silk, No. 4	Spools	2	2	4	6	.20
Sutures, silk, No. 5	do	2	2	4	6	.20
Towels, bath	Number	12	24	50	100	.70
Towels, dish	do	6	12	24	48	.30
Towels, hand	do	24	48	100	200	.40
Towels, operating	Dozen	2	2	8	8	2.40
Records, history	Thousand	½	½	1	1	9.50
Records, temperature	do	½	½	1	1	11.00
Records, treatment	do	½	½	1	1	7.00
Records, admission	do	½	½	1	1	16.00

## INSTRUMENTS.

(Kny-Scheerer Company, 20th Ed.)

Page.	No.	Articles.	Unit.	Number of beds.				Unit cost.
				6	12	20	50	
1013	A- 475	Tenaculum, plain, dissecting, all metal	Number	2	2	4	4	\$1.00
1022	A- 1045	Tape measure, steel, 2 meters, graduated in inches and millimeters	do	1	1	1	1	2.00
1022	A- 1084	Lens, magnifier (3-inch double convex)	do	1	1	1	1	3.00
1045	A- 2270	Arkansas hard stone, 5 by 2 inches	do	1	1	1	1	6.00
1100	A- 4800	Stethoscope, Ford's	do	1	1	1	1	7.00
1024	A- 1171	Post mortem set, medium, in oak case, wood blocked	do			1	1	8.00
1144	A- 7175	Bier's glass cups, 2-inch, round	do			1	1	4.50
1144	A- 7175	Bier's glass cups, 2-inch, oval	do			1	1	4.50
2006	B- 112	Mask, chloroform, Ochsner's	do	1	1	1	1	3.50
2009	B- 244	Forceps, tongue, Collin's, large	do	1	1	1	1	4.00
2023	B- 645	Forceps, hemos., Ochsner's, 6½-inch	do	6	6	12	12	3.00
2023	B- 669	Forceps, hemos., Pean's, 5½-inch	do	6	6	24	24	2.00
2023	B- 678	Forceps, hemos., Pean's, Mayo patent, 6½-inch	do	2	2	12	12	3.00
2025	B- 748	Forceps, hemos., Pratt's T-shaped straight	do	2	2	6	6	3.00
2025	B- 750	Forceps, hemos., Pratt's T-shaped curved	do	1	1	1	1	4.00
2026	B- 762	Forceps, compression, Pratt's, 8-inch	do			6	6	5.00
2037	B- 1170	Needle, aneurism, Carstein's, right	do			1	1	3.00
2037	B- 1171	Needle, aneurism, Carstein's, left	do			1	1	3.00
2039	B- 1240	Forceps, gall stone (Blake's, straight, assorted sizes)	do			3	3	4.00
2039	B- 1242	Forceps, gall stone (Blake's, curved, assorted sizes)	do			3	3	4.50
2041	B- 1300	Forceps, intestinal, Barrett's, rubber, 8½-inch, soft jaw	do	1	1	1	1	7.50
2042	B- 1333	Forceps, intestinal, Doyen's, 8½-inch, straight	do	2	2	2	2	5.50
2042	B- 1335	Forceps, intestinal, Doyen's, 9-inch, curved	do	2	2	4	4	5.50
2046	B- 1410	Forceps, intestinal, Linnartz's, 3-blade, 8½-inch	do	1	1	1	1	22.00
2048	B- 1467	Forceps, intestinal, Murphy's angular	do	2	2	4	4	2.80
2052	B- 1566	Buttons, anas., round, Murphy's soft	Sets	1	1	1	1	11.00
2053	B- 1579	Buttons, anas., oval, Murphy's gastro-ent	do			2	2	11.00
2055	B- 1632	Forceps, kidney, elev., Lower's	Number			1	1	8.00
2060	B- 1776	Clamp, pile, Kelsey's	do	1	1	1	1	8.00
2064	B- 1900	Knife, amputating, Liston's, large, 7½-inch	do			1	1	7.00
2064	B- 1920	Knife, cutting, large blade, 7½-inch	do	1	1	1	1	7.50
2065	B- 1970	Razor, aseptic, metal handle, 4½-inch	do	1	1	2	2	3.00
2073	B- 2065	Knives, operating; No. 53, 3, No. 54, 3	do	3	3	6	6	3.50
2079	B- 2265	Chisels, bone, Brun's 8, 12 and 14-inch	do	3	3	3	3	3.00
2081	B- 2346	Gauge, bone, Brun's, 10, 12 and 14-inch	do	3	3	3	3	3.00
2081	B- 2347	Gauge, bone, Brun's, 10, 12 and 14-inch	do			3	3	3.00
2083	B- 2452	Mallet, boxwood, plain	do	1	1	1	1	3.00
2084	B- 2481	Mallet, Bergmann's, large, lead filled	do	1	1	1	1	8.50
2071	B- 2028	Bistury, blunt, Nos. 11, 12, 14, and 15	do	4	4	4	4	3.00
2085	B- 2543	Curettes, bone, Brun's smooth handle, octagonal, Nos. 1, 3, 4, and 5	do	2	2	4	4	3.50
2091	B- 2745	Scoop, gall stone, Luer-Koert's, double ended, 4 sizes	do			4	4	4.50
2092	B- 2833	Director, rectal, Gant's, set of 7-inch metal case	Set	1	1	1	1	10.00
2092	B- 2810	Director, and tongue tie	Number	1	1	2	2	1.00
2099	B- 3024	Drill, bone, Still's, 9 points	do			1	1	42.00
2102	B- 3085	Forceps, bone cutting, Liston's, for use with 2 hands	do	1	1	1	1	5.00

## Instruments—Continued.

Page.	No.	Articles.	Unit.	Number of beds.				Unit cost.
				6	12	20	50	
2102	B- 3115	Forceps, bone cutting, Liston's angular	Number			1	1	\$6.00
2103	B- 3150	Forceps, bone, cutting, Velpeaus, maxillary				1	1	7.50
2104	B- 3167	Shears, plain, rib, curved blade	do	1	1	1	1	7.50
2110	B- 3316	Rongeur, bone, Esmarch's 8½-inch, with 1-inch jaw	do			1	1	12.00
2109	B- 3297	Rongeur, bone, Derby's, combined with osteophore, straight	do			1	1	8.00
2122	B- 3579	Forceps, holding, Lane's original, 12-inch	do	1	1	2	2	14.00
2123	B- 3597	Forceps, bone holding, Mathieu's, with 12 prongs	do	1	1	2	2	12.00
2126	B- 3681	Rib raspator or elevator, Doyen's	do	1	1	1	1	5.00
2127	B- 3753	Elevator, plain, periosteal, with raspator	do	1	1	1	2	2.00
2131	B- 3910	Raspator, periosteal, Langenbeck's hook shape	do	1	1	1	1	3.50
2132	B- 3936	Raspator, periosteal, Sayre's, double ended	do	1	1	1	1	2.50
2136	B- 4045	Retractor, Forwood's set of 2 nested	Set	2	2	2	2	5.00
2136	B- 4054	Retractor, Fritch's, wide	Number			2	2	5.50
2137	B- 4083	Retractor, Halstead's, 12 prongs		1	1	1	1	4.50
2141	B- 4155	Retractor, Mayo-Collin's set of 2 nested	Set			2	2	2.50
2142	B- 4198	Retractor, Parker's	do	1	1	1	1	1.50
2144	B- 4231	Retractor, Simpson-Mayo's self-retaining	Number			1	1	17.00
2147	B- 4390	Clamps, towel, Backaus'		6	6	12	12	2.00
2149	B- 4489	Blade saw, Satterlee's, blade 11½-inch	do	1	1	1	1	5.50
2150	B- 4509	Bone saw, Gutsch's	do			1	1	11.00
2152	B- 4545	Metacarpal saw, Langenbeck's	do	1	1	1	1	3.00
2153	B- 4566	Exsection saw, Hay's for cranial work	do			1	1	3.50
2153	B- 4570	Wire saw, Gilli's, 12-inch	do			6	6	.80
2153	B- 4572	Wire 2, Gilli's, 20-inch	do			6	6	1.00
2153	B- 4574	Handles for Gilli's saws, solid	do			1	1	2.50
2154	B- 4609	Bone plate, Lane's, steel, for femur, 6 sizes	do			6	6	1.25
2154	B- 4611	Bone plate, Lane's, steel, 5 sizes, No. 1, 2, 3, 4, and 5	do			5	5	1.25
2158	B- 4739	Screw-driver, Lane's	do			1	1	3.50
2168	B- 5057	Trephine, Doyen's, with drill points and 4 burs	Set	1	1	1	1	34.00
2169	B- 5067	Trephine, Galt's, set of 2	do			2	2	10.00
2182	B- 5190	Forceps, bullet, Collin's	Number			1	1	8.50
2182	B- 5175	Bullet probe, U. S. A., silver				1	1	2.00
2188	B- 5353	Proctoscope, rectal, Kelly's, 2-inch	do	1	1	1	1	7.00
2188	B- 5346	Proctoscope, rectal, Kelly's, ½-inch diameter, 5½-inch long	do			1	1	4.50
		Proctoscope, rectal, Kelly's 17-inch long	do			1	1	9.00
2188	B- 5351	Applicator for above proctoscope	do			1	1	
2189	B- 5370	Speculum, rectal, Pratt's bivalve	do	1	1	1	1	4.50
2221	B- 5758	Needle holder, woman's, hospital	do	1	1	1	1	7.00
2222	B- 5800	Needles, surgeon's, straight, No. 1 and 2	Dozen	6	6	24	24	1.00
2223	B- 5805	Needles, surgeon's, big, curved (No. 1: 12) (No. 9: 4) (No. 1: 1)		6	6	24	24	1.20
2331	B- 5899	Needles, liver, Collin's, blunt point	do			2	2	3.50
2235	B- 6031	Needles, Mayo's catgut, No. 1 to 4	do	6	6	24	24	2.00
2235	B- 6035	Needles, Mayo's	do			12	12	2.00
2243	B- 6272	Needles, Perineum, Ashton's, full curved	do			1	1	2.50
2262	B- 7163	Forceps, thumb, serrated handles, 5	Number	2	2	4	4	1.00
2262	B- 7233	Forceps, tissue, 1 and 2 teeth 5-inch		2	2	4	4	1.20
2262	B- 7239	Forceps, tissue, 1 and 2 teeth 7-inch	do	2	2	4	4	2.00
2268	B- 7691	Scissors, hand forged, straight, 6-inch, No. 2	do	1	1	1	1	3.50
2268	B- 7691	Scissors, hand forged, straight, 6-inch, No. 3	do			1	1	3.50

## Instruments—Continued.

Page.	No.	Articles.	Unit.	Number of beds.				Unit cost.
				6	12	20	50	
2271	B- 7858	Scissors, dissecting, Mayo's, 6 $\frac{1}{2}$ -inch, straight	Number			1	1	\$3.50
2271	B- 7864	Scissors, dissecting, Mayo's, 6 $\frac{1}{2}$ -inch, curved or flat	do	1	1	1	1	3.50
2271	B- 7891	Scissors, operating, Mixer's, 6 $\frac{1}{2}$ -inch, straight	do			1	1	2.50
2276	B- 8117	Scissors, bandage, Lister's, ang., square shank, 7-inch	do			1	2	3.50
2287	B- 8539	Levix Extracting apparatus, complete with rope and wts	do	1	1	2	2	11.00
		Syringes, hypodermic, 1 c. c., glass	do	2	2	12	12	4.00
		Syringes, hypodermic, 1 c. c., metal	do	6	6	12	12	3.00
		Syringes, hypodermic, 5 c. c., glass	do	1	1	6	6	8.00
		Syringes, hypodermic, 2 c. c., glass	do			6	6	5.50
		Syringes, glass, penis	do	12	12	24	24	.30
2361	B-10448	Trocar, ovarian, Wylis's, blunt	do	1	1	1	1	4.50
2362	B-10492	Trocar, gall bladder, Ochsner's 17 F. S	do			1	1	3.50
2359	B-10403	Trocar, telescopic, set of 4 in cylinder pencil case	do	1	1	1	1	5.50
2369	B-10765	Plain intravenous needle, platinum-iridium with slip on attachment, 2-inch long, to fit a c. c. glass syringe	do			3	3	.80
2369	B-10815	Saline infusion graduated glasses, 500 c. c.	do	1	1	1	1	7.00
3248	C-12970	Gag, mouth, Denhart's	do	1	1	1	1	4.50
3026	C- 1905	Ophthalmoscope, Liebreich's in case	do			1	1	6.00
3053	C- 4065	Bags, Politzer's	do			1	1	4.50
3053	C- 4097	Catheter, eustachian, 1 size	do			1	1	1.50
3057	C- 4439	Chisels, mastoid, Bishop's, 1 set	Set			6	6	2.00
3059	C- 3440	Gauges, mastoid, Bishop's, 1 set	do			6	6	2.50
3046	C- 3663	Op. Set, ophthalmic, in German silver case	do			1	1	40.00
3060	C- 4526	Curettes, mastoid, round, 4 sizes	Number			4	4	3.50
3064	C- 4789	Rongeur, mastoid, Alex's	do			1	1	7.50
3072	C- 5289	Tenotome, ear	do	1	1	1	1	3.50
3077	C- 5568	Probe, ear, fine	do	1	1	1	1	1.00
3049	C- 3771	Eye-test type card, Snellen's	do	1	1	1	1	3.00
		Eye-test colors (yarn)	Set	1	1	1	1	8.00
		Stop cocks, H. R. to fit rubber tubing	Number	2	2	6	10	.50
		Rubber tubing, black, for irrigator, $\frac{1}{8}$ -inch	Meter	5	5	10	20	1.00
3081	C- 5883	Erhardt's ear specula, metal, set of 3	Set	1	1	1	1	2.50
3101	C- 7183	Curettes, Gottstein's, adenoid, 3 sizes, full curved	Number			3	3	3.50
3159	C- 9183	Folsmon's nasal specula	do	1	1	1	1	2.50
3188	C-10893	Luer's German silver trachea canula, 6 sizes	do	3	3	3	3	4.50
3188	C-11590	O'Dwyer's Intubation Set	do			1	1	48.00
3200	C-11794	Forcep, tonsil, White's	do			1	1	5.50
3201	C-11837	Hock, tonsil, Freer's, double	do			1	1	3.00
3202	C-11877	Knife, tonsil, Douglas'	do			1	1	3.50
3214	C-12005	Scissors, tonsil, Boettcher's	do			1	1	6.50
3253	C-13299	Depressor, tongue, plain, glass	do	1	1	2	2	1.00
3253	C-13385	Depressor, tongue, Boosworth's	do	1	1	2	2	2.00
		Needles, platinum-iridium, 7 centimeters long to fit 2 c. c., all glass syringe for spinal anesthesia	do			3	3	1.50
		Mirrors, laryngeal, $\frac{1}{4}$ -inch diameter, with one piece round handle	do	1	1	1	1	1.50
3261	C-13894	Head mirror, concave, 3 $\frac{1}{4}$ -inches, with 10 millimeters hole	do	1	1	1	1	3.50
3262	C-14043	Schroetter's headband ribbon for head mirror	do	1	1	1	1	3.50
3292	C-15735	Dilators, esophageal, size 16-36 F. in set	Set			1	1	3.50
3292	C-15739	Bougies, esophageal, olive tips, MacKensie-Ingals's, sizes 5 to 14, in set	do			1	1	3.00
3294	C-15769	Tubes, stomach, Faucher's	Number	1	1	2	4	3.00



## Instruments—Continued.

Page.	No.	Articles.	Unit.	Number of beds.				Unit cost.
				6	12	20	50	
3275	C-15325	Atomizer .....	Number	1	1	3	6	\$2.00
3298	C-15904	Tooth extraction Forceps:						
		Fig. 1L, root, upper front, straight, large .....	do	1	1	1	1	4.00
		Fig. 2M, upper or lower, half curved .....	do	1	1	1	1	4.00
3300		Fig. 17, universal, molar, lower .....	do	1	1	1	1	4.00
3301		Fig. 13, incisor, upper .....	do	1	1	1	1	4.00
3311		Fig. 24, molar upper, either side .....	do	1	1	1	1	4.00
4021	C-15948	London College foil carrier .....	do	1	1	1	1	2.00
4064	D- 1408	Otis' urethral irrigator .....	do	1	1	1	1	2.00
	D- 2701	Van Buren's sounds, F. 11, 13, 15, 17, 19, 21, 23, 25, 27, and 29 .....	do	10	10	10	10	1.50
4084	D- 2676	Otis' Bougie sounds, F. 11, 13, 15, 17, 19, 21, 23, 25, 27, and 29 .....	do			10	10	.50
4062	D- 3178	Catheter, plain, male, double cur, with divided channel, German silver .....	do	1	1	2	2	3.50
4063	D- 3312	Gouley's filiform bougie .....	do	12	12	24	24	.50
4061	D- 3162	Catheter, female, plain, double cur .....	do	1	1	2	2	1.50
4061	D- 3124	Catherer, male and female, German silver .....	do	1	1	1	1	6.50
4067	D- 3490	Catheter, rubber, soft, sizes 10, 14, 18, and 20 .....	do	4	4	8	15	.80
5003	E- 69	Dilator for eclampsia, Mundus's .....	do	1	1	1	1	65.00
5005	E- 143	Forceps, obst., Dubois' .....	do	1	1	1	1	18.00
5016	E- 886	Forceps, embryotomy, Heywood-Smith's .....	do	1	1	1	1	6.50
5017	E- 905	Forceps, placenta, Bond's .....	do	1	1	1	1	4.50
5023	E- 1026	Curettes, placenta, Munde's, 3 sizes .....	do	3	3	3	3	3.50
5032	E- 1421	Perforator, Naegle's, with snap catch .....	do	1	1	1	1	7.50
5044	E- 1932	French nail file .....	do	1	1	2	2	.80
5046	E- 2056	Nail scissors, curved, 4½-inch .....	do	1	1	1	1	2.00
5064	E- 2204	Applicators, plain, aluminum .....	do	2	2	6	6	2.00
5066	E- 2289	Forceps, dressing, Bozeman's, 11-inch .....	do			2	2	3.50
5079	E- 2875	Douche, uterine Glasgow, metal .....	do	1	1	2	2	2.50
5083	E- 3077	Curette, uterine, Auvard's irrigating, 6 sizes, Nos. 1, 2, and 3 .....	do			6	6	5.50
5085	E- 3208	Curettes, Kny-Scheerer Co.'s curved, rigid, shank, 3 sizes .....	do	3	3	3	3	5.00
5094	E- 3767	Uterine sound, Spiegelberg's .....	do	1	1	1	1	3.00
5097	E- 3867	Uterine dilator, Goodell's, large, entirely aseptic .....	do	1	1	1	1	11.00
5105	E- 4061	Uterine dilator, Sim's, with 3 blades .....	do	1	1	1	1	16.00
5112	E- 4793	Forceps, tenaculum Braun's .....	do	1	1	1	1	4.00
5115	E- 4907	Forceps, vulsellum, Cuashing's .....	do	1	1	1	1	4.50
5116	E- 4915	Forceps, vulsellum, Doyen's .....	do	1	1	1	1	6.00
5139	E- 5723	Forceps, hysterectomy, Pean's, curved or flat, 8½-inch .....	do			6	6	5.00
5158	E- 6288	Forceps, uterine, elev., Somer's .....	do			1	1	11.00
5166	E- 6452	Pedicle needle, Deschamps', extra large, blunt, right .....	do			2	2	4.00
5166	E- 6453	Pedicle needle, Dexchamp's, extra large, blunt, left .....	do			2	2	4.00
5166	E- 6466	Abdominal pedicle needle, Emmett's, small .....	do			1	1	4.00
5166	E- 6467	Abdominal pedicle needle, Emmett's, large .....	do			1	1	4.00
5176	E- 6696	Retractors, Kelly's, 4 sizes .....	do			4	4	4.00
5204	E- 8458	Vaginal speculum, Auvard's, with weight .....	do	1	1	2	2	6.50
5204	E- 8471	Vaginal speculum, Brewer's .....	do	1	1	2	2	4.00

## LABORATORY.

## ACCESSORIES.

Articles.	Unit.	Number of beds.				Unit value.
		6	12	20	50	
Microscope, Zeiss, with 3 objectives and 2 eye piece, triple nose piece, etc., $\frac{1}{8}$ , $\frac{1}{4}$ , and $\frac{1}{2}$ oil emersion .....	Number.	1	1	1	1	₹350.00
Centrifuge, 2 tubes .....	do	---	---	1	1	20.00
Dentrifuge, extra tubes for same .....	do	---	---	6	12	.30
Ureometer, Doremus' .....	do	---	---	2	2	2.50
Urinometer .....	do	1	1	1	1	2.00
Test-tube holder .....	do	1	1	1	1	1.50
Test tubes, nested 3 or 4 in sets .....	Sets.	2	2	5	5	.80
Tubes, Esbach's .....	Number.	1	1	2	2	2.00
Retort stand, 3 rings .....	do	---	---	1	1	3.00
Pipette with stop cock (50 c.c.) .....	do	---	---	2	2	2.00
Pipette, red cell count .....	do	---	---	1	1	1.50
Pipette, white cell count .....	do	---	---	1	1	1.50
Counting chamber, Thoma .....	do	---	---	1	1	8.00
Hæmoglobin scale, Tallquist .....	do	---	---	1	1	3.20
Slides .....	do	20	20	100	100	.02
Cover glasses .....	do	20	20	100	100	.01
Platinum loops .....	do	1	1	1	1	3.00
Litmus paper, blue .....	Packages.	2	2	4	6	.03
Litmus paper, red .....	do	2	2	4	6	.03
Glasses, Beakers, 30 c.c. ....	Number.	---	---	6	6	.80
Glasses, Pituri, 3 inches, pelri .....	do	---	---	6	6	.50
Glasses, graduated, 500 c.c. ....	do	---	---	2	2	.85
Glasses, graduated, 100 c.c. ....	do	1	1	2	2	.40
Glasses, graduated 30 c.c. ....	do	---	---	2	2	.30
Glasses, graduated 10 c.c. ....	do	---	---	2	2	.20
Glasses, gravity, 100 c.c., conical .....	do	---	---	6	6	.60

## STAINS AND REAGENTS.

Articles.	Unit.	Number of beds.				Unit value.
		6	12	20	50	
Alcohol, ethyl, absolute .....	Liter.	100	100	250	250	4.18
Alcohol, methyl .....	do	100	100	250	250	4.00
Alizarin .....	Kilo.	---	---	10	10	50.00
Antiformin .....	C.C.	---	---	500	500	10.00
Balsam, Canada (terebinth. can.) .....	Liter.	---	---	30	30	19.50
Carbol fuchsin solution .....	do	100	100	100	100	8.50
Congo red .....	Kilo.	---	---	10	10	60.00
Dimethyl-amido-benzol .....	do	---	---	10	10	70.00
Eosin .....	do	---	---	10	10	56.00
Ferric chloride .....	do	---	---	100	100	1.06
Pheling's solution No. 1 .....	Liter.	500	500	500	500	4.00
Pheling's solution No. 2 .....	do	500	500	500	500	4.00
Ligroin .....	do	---	---	100	100	12.00
Löffler's solution (Meth. blue) .....	do	200	200	200	200	8.00
Oil, cedar .....	do	30	30	30	30	20.00
Phenolphthalein .....	Gram.	---	---	10	10	27.50
Stain, Gavvet's (Meth. blue) .....	C.C.	200	200	200	200	6.60
Stain, Gentian violet .....	Liter.	100	100	100	100	8.00
Stain, Giemsa .....	do	100	100	100	100	8.00
Stain, Wright's .....	do	100	100	100	100	7.50
Xylol .....	do	100	100	250	250	1.50

## MEDICINES.

Items.	Amount.	Price.
Acacia (pulvis) .....	1,000 grams .....	P3.29
Acetanilidum .....	250 grams .....	.68
Phenacitin .....	500 grams .....	3.00
Acidum aceticum .....	250 cubic centimeters .....	.30
Acidum boricum (pulvis) .....	2,000 grams .....	.84
Acidum citricum .....	250 grams .....	.35
Acidum hydrochloricum .....	500 cubic centimeters .....	.62
Acidum nitricum .....	500 cubic centimeters .....	.88
Acidum oxalicum .....	1 kilo .....	.84
Acidum picricum .....	1 kilo .....	.60
Acidum salicylicum .....	250 grams .....	2.44
Acidum sulphuricum .....	250 cubic centimeters .....	.15
Acidum sulphuricum aromaticum .....	250 cubic centimeters .....	.47
Acidum tannicum (pulvis) .....	100 grams .....	.45
Acidum tartaricum .....	500 grams .....	1.20
Aconiti tinctura .....	250 cubic centimeters .....	.60
Adrenalini hydrochloridum .....	80 cubic centimeters .....	2.00
Aether (100-gram tin) .....	30 cans .....	9.21
Aetheris spiritus compositus .....	250 cubic centimeters .....	1.87
Aetheris spiritus nitrosi .....	1 liter .....	3.68
Alcohol .....	10 liters .....	9.00
Alumen (pulvis) .....	500 grams .....	.27
Ammoniae aqua .....	2 liters .....	1.66
Ammoniae, spiritus aromaticus .....	1 liter .....	2.73
Ammonii carbonas .....	250 grams .....	.25
Ammonii chloridii trochisci .....	1,000 grams .....	1.76
Ammonii chloridum .....	500 grams .....	.50
Antimonii et potassii tartras .....	30 grams .....	.11
Apomorphinae hydrochloridum H. T. $\frac{1}{2}$ gram .....	1 tube .....	.84
Argenti nitras (in crystals) .....	50 grams .....	1.61
Aspidii oleoresina .....	200 grams .....	1.80
Atropine sulphas H. T. $\frac{1}{10}$ gram .....	4 tubes .....	.28
Atropinae sulphas .....	10 grams .....	2.41
Balsamum peruvianum .....	500 grams .....	5.25
Belladonae emplastrum .....	3 tins .....	15.15
Bismuthi subgallas .....	1,000 grams .....	8.60
Bismuthi subnitras .....	2 kilos .....	23.12
Buchu fluidextractum .....	500 cubic centimeters .....	5.00
Caffeina citrata .....	100 grams .....	1.22
Camphora (pulvis) .....	1,000 grams .....	3.40
Cantharidis emplastrum .....	3 tins .....	15.00
Chloralum hydratum .....	500 grams .....	1.95
Chloroformum .....	2 liters .....	5.46
Chrysarobinum .....	1,000 grams .....	13.80
Cinchonae tinctura composita .....	1,500 cubic centimeters .....	3.00
Cocainae hydrochloridum .....	100 grams .....	38.90
Codeina .....	100 grams .....	48.90
Collodium .....	500 cubic centimeters .....	1.14
Creosotum .....	100 cubic centimeters .....	.65
Cretae puperata .....	1,000 cubic centimeters .....	.40
Cupri sulphas .....	30 grams .....	.10
Digitalinum H. T. $\frac{1}{10}$ gram .....	2 tubes .....	.20
Digitalis tinctura .....	250 cubic centimeters .....	.40
Ergotae fluidextractum .....	500 cubic centimeters .....	3.50
Ergotinum H. T. 1 gram .....	2 tubes .....	.20
Eucalyptol .....	100 cubic centimeters .....	.85
Ferri chloridi tinctura .....	1,500 cubic centimeters .....	4.30
Zerri iodidi syrupus .....	1,000 cubic centimeters .....	1.18
Glycerinum .....	5 liters .....	15.85
Glycyrrhizae extractum purum (pulvis) .....	500 grams .....	.85
Glycyrrizae mistura composita .....	2 kilos .....	1.84
Glycyrrizae pulvis compositus .....	2,000 grams .....	2.40
Guaiaecolae carbonas .....	1,000 grams .....	17.60
Hexamethylenamina (Urotropin, 5 grams tablets) .....	1,000 tablets .....	2.60
Hydrargyri chloridum corrosivum .....	1,000 grams .....	3.88
Hydrargyri chloridum mite, $\frac{1}{2}$ gram .....	1,000 tablets .....	.75
Hydrargyri chloridum mite, $\frac{1}{10}$ gram .....	2,000 tablets .....	1.40
Hydrargyri chloridum mite .....	200 grams .....	1.08
Hydrargyri iodum flavum, $\frac{1}{2}$ gram .....	1,000 tablets .....	1.24
Hydrargyri nitratis unguentum .....	1,000 grams .....	3.68
Hydrastis fluidextractum .....	250 cubic centimeters .....	6.98
Ichthyolum .....	1,000 grams .....	48.96
Iodoformum .....	500 grams .....	9.30

## Medicines—Continued.

Items.	Amount.	Price.
Iodum .....	250 grams .....	\$5.20
Iodum tinctura .....	1,000 cubic centimeters .....	7.25
Ipecacuanhae pulvis .....	2 kilos .....	19.90
Ipecacuanhae fluidextractum .....	250 cubic centimeters .....	3.00
Magnesii carbonas (powdered) .....	1 kilo .....	1.12
Magnesii sulphas .....	10 kilos .....	2.40
Menthol .....	60 grams .....	1.20
Morphinae sulphas (pulvis) .....	30 grams .....	9.30
Morphinae sulphas, 8 mgm. hypodermic tablets .....	10 tubes .....	1.10
Morphinae sulphas, 8 mgm. tablets .....	100 tablets .....	.50
Myrrhae tinctura .....	500 cubic centimeters .....	1.50
Normal Saline solution .....	250 tablets .....	2.00
Nucis vomicae tinctura .....	250 cubic centimeters .....	.70
Oleum caryophylli .....	30 cubic centimeters .....	.20
Oleum Chenopodium .....	500 cubic centimeters .....	3.00
Oleum menthae piperitae .....	100 cubic centimeters .....	1.80
Oleum morrhuae .....	5,000 cubic centimeters .....	8.70
Oleum ricini .....	15 liters .....	8.55
Oleum santali .....	500 cubic centimeters .....	7.90
Oleum terribinthinae .....	7 liters .....	4.40
Oleum theibrinatus .....	500 grams .....	1.35
Oleum tiglli .....	30 cubic centimeters .....	.25
Opil tinctura .....	250 cubic centimeters .....	1.95
Opil tinctura camphorata .....	500 cubic centimeters .....	1.20
Opil pulvis .....	100 grams .....	.65
Opil et opecacuanhae pulvis .....	1,000 grams .....	3.90
Pepsinum .....	250 grams .....	2.50
Peptonizing tablets .....	250 tablets .....	.50
Petrolatum .....	5 kilos .....	2.10
Petrolatum liquidum .....	1 liter .....	1.40
Phensylis salicylas (salol) .....	1,000 cubic centimeters .....	5.65
Pilocarpinae hydrochloridum H. T. † gram .....	2 tubes .....	1.60
Pilulae aloini compositae .....	250 cubic centimeters .....	.50
Pilulae catharticas compositae .....	500 tablets .....	.90
Plumbi acetat .....	250 grams .....	.25
Potassii acetat .....	500 grams .....	1.40
Potassii arsenitis liquor .....	250 cubic centimeters .....	.20
Potassii bicarbonas .....	500 grams .....	.35
Potassii bromidum .....	1,500 grams .....	4.70
Potassii chloras .....	200 grams .....	.45
Potassii et sodii tartras, pulvis (Rochelle salt) .....	5,000 grams .....	6.50
Potassii hydroxidum .....	1 kilo .....	8.00
Potassii iodidum .....	1,000 grams .....	19.38
Potassii permanganas .....	1,000 grams .....	2.10
Protargol .....	250 grams .....	27.50
Quininae and urea hydrochloridum H. T. 5 grams .....	20 tubes .....	7.00
Quininae sulphas, (pulvis) .....	5 kilos .....	138.50
Quininae sulphas, 5 grams .....	5,000 tablets .....	42.50
Resorcin .....	1,000 grams .....	8.45
Rhamni prushianae fluidextractum .....	1,000 cubic centimeters .....	1.85
Sacharum lactis (pulvis) .....	100 grams .....	.15
Santoninum, 32 mgm. tablets .....	1,000 tablets .....	10.60
Scillae syrupus compound .....	1 liter .....	.80
Sodii bicarbonas .....	5 kilos .....	2.00
Sodii bicarbonas .....	1,000 tables .....	.60
Sodii boaras (pulvis) .....	1,000 grams .....	.60
Sodii bromidum .....	250 grams .....	.50
Sodii salicylas .....	5 kilos .....	14.50
Strophanthi tinctura .....	100 cubic centimeters .....	.40
Strychninae sulphas, 1 mgm. Hypodermic tablets † gram .....	500 tablets .....	.32
Sulphur lotum .....	250 grams .....	.15
Syrupus hypophosphitum compositus .....	10,000 cubic centimeters .....	.90
Thymol .....	30 grams .....	1.35
Stovaine .....	330 grams .....	7.25
Zinci oxidum .....	1,000 grams .....	1.60
Zinci sulphas .....	250 grams .....	.15
Zingiberis fluidextractum .....	500 grams .....	2.10
		810.44

*Medicines—Continued.*

## ANTISEPTICS AND DISINFECTANTS.

Items.	Amount.	Price.
Alcohol, ethyl .....	10 liters .....	41.80
Antiseptic tablets (Bichloride 1 gram) .....	1,000 .....	1.80
Cresol .....	12 liters .....	18.20
Cresol compound liquid .....	12 liters .....	12.00
Formaldehyde solution (40 per cent) .....	2 liters .....	1.60
Mercury, corrosive chloride .....	1 liter .....	8.60
Phenol crude .....	20 liters .....	10.00
Saponis viridis .....	1 liter .....	.40
Sulphur in roll .....	5 liters .....	1.25
Phenol crystallized .....	5 liters .....	20.00
		105.15

## BOTTLES AND JARS CONTAINED IN DISPENSING SET.

Tinctura bottles, 1-liter .....	11 bottles .....	1.65
Tincture bottles, 500-cubic centimeter .....	9 bottles .....	.45
Tincture bottles, 250-cubic centimeter .....	21 bottles .....	.84
Tincture bottles, 125-cubic centimeter .....	6 bottles .....	.24
Tincture bottles, 60-cubic centimeter .....	18 bottles .....	.54
Tincture bottles, amber colored, 125-cubic centimeter .....	2 bottles .....	.08
Steeple-top jars, 250-gram .....	10 jars .....	4.00
Salt mouth bottles, 500-gram .....	9 bottles .....	7.20
Salt mouth bottles, 250-gram .....	28 bottles .....	16.80
Salt mouth bottles, 125-gram .....	22 bottles .....	11.00
Salt mouth bottles, 60-gram .....	23 bottles .....	9.20
Salt mouth bottles, amber colored, 60-gram .....	4 bottles .....	2.00
		58.00

## HOSPITAL STORES.

Brandy, 1-liter bottle .....	2 bottles .....	3.20
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## MISCELLANEOUS.

Capsules, gelatine, No. 1 .....	500 bottles .....	.60
Capsules, gelatine, No. 2 .....	500 bottles .....	.65
Capsules, gelatine, No. 5 .....	500 bottles .....	.45
Capsules, gelatine, No. 00 .....	500 bottles .....	.55
Corks, assorted .....	25 gross .....	25.00
Cotton, absorbent .....	15 kilos .....	13.50
Gauze, plain .....	500 meters .....	30.00
Paper, filtering, round, 25 centimeters .....	3 pakages .....	8.00
		73.75

*Medicines—Continued.*

## ACCESSORIES.

Items.	Amount.	Price.
Balance, Apothecary's, 1-kilo .....	1 balance .....	12.00
Balance, Apothecary's, 1-gram .....	1 balance .....	5.00
Funnels, glass, 1,000-cubic centimeter .....	2 funnels .....	1.00
Funnels, glass, 500-cubic centimeter .....	2 funnels .....	.70
Funnels, glass, 100-cubic centimeter .....	2 funnels .....	.40
Glasses, graduated, 1,000-cubic centimeter .....	3 glasses .....	1.20
Glasses, graduated, 500-cubic centimeter .....	3 glasses .....	1.05
Glasses, graduated, 100-cubic centimeter .....	3 glasses .....	.75
Glasses, graduated, 10-cubic centimeter .....	2 glasses .....	.30
Mortar and pestle, porcelain, 500-cubic centimeter .....	1 mortar .....	1.20
Mortar and pestle, porcelain, 100-cubic centimeter .....	1 mortar .....	.65
Rod, glass, size of lead pencil .....	1 meter .....	1.00
Scale, avoirdupois, Fairbank's, platform 200-kilo .....	1 scale .....	50.00
Tubing, glass, assorted sizes .....	6 meters .....	1.20
		76.45

*List of blank forms in common use in hospitals.*

- P. H. S. Form No. 1. Requisition of Supplies.  
 P. H. S. Form No. 6. Certificate of Death.  
 P. H. S. Form No. 36 (A). Clinical Record Sheet No. 1.  
 P. H. S. Form No. 36. Clinical Record Sheet No. 2.  
 P. H. S. Form No. 77. Temperature Chart.  
 P. H. S. Form No. 130 (A). Clinical Laboratory Record.  
 P. H. S. Form Prescription Blank.  
 Medical and Surgical Report.  
 Provincial Form No. 7 (A). Receipt Blank.  
 Provincial Form No. 83. Certificate of Birth.  
 General Form No. 6 (A). Payroll.

# PLANS FOR CONSTRUCTION OF HOSPITAL BUILDINGS.

## I.

*Rough estimate for reënforced-concrete construction; galvanized-iron roofing; ceilings of wood.*

### Project No. 1:

Cost ..... ₱32,000.00

Unit No. 1. Administration Building.

Unit No. 2. Ward No. 1.

Unit No. 3. Kitchen.

### Project No. 2:

Cost ..... ₱42,000.00

Unit No. 1. Administration Building.

Unit No. 2. Ward No. 1.

Unit No. 3. Kitchen.

Unit No. 4. Ward No. 2 and passage.

### Project No. 3:

Cost ..... ₱60,000.00

Entire Building.

NOTE.—Cost will vary according to locality, and to fluctuation in prices of materials.

This estimate is based upon the building shown by Plate II, lower elevation (floor plan, pl. I).

## II.

Galvanized-iron roof, wooden partitions, ceilings and floors.

Unit No. 1. Administration building Ward No. 1, kitchen and passage as shown:

Lumber .....	₱3,800.00
Windows .....	430.00
Doors .....	454.00
Galvanized iron roofing.....	2,500.00
Hardware .....	180.00
Sanitary fixtures .....	800.00
Concrete work .....	5,000.00
Transportation .....	800.00
Labor .....	2,000.00
	<hr/>
	₱15,964.00
Contingencies .....	2,000.00

Total ..... 17,964.00

Unit No. 2. Administration building Wards No. 1 and 2, kitchen and passage:

Cost of Unit No. 1.....	₱17,964.00
Ward No. 2.....	6,251.50

---

24,215.50

Unit No. 3. Administration building Wards No. 1, 2 and 3, operating room, kitchen, and passage:

Unit No. 2.....	₱24,215.50
Ward 3 and operating room.....	11,300.00

---

35,515.50

NOTE.—Estimated cost of original plan, that is, with semicircular corridor is ₱40,449.80.

This estimate is based upon the building shown by Plate II upper elevation (floor plan, pl. I).

### III. )

Wooden posts; nipa roof; partitions of sawale; bamboo sidings; floor raised from the ground.

1. Administration building, Ward No. 1, kitchen and passage:

Lumber .....	₱1,650.00
Nipa .....	170.00
Bamboo .....	500.00
Sawale .....	150.00
<hr/>	
Windows .....	₱2,470.00
Doors .....	430.00
Hardware .....	454.00
Galvanized iron sheets.....	250.00
Sanitary fixtures .....	175.00
Concrete work .....	800.00
Transportation .....	1,600.00
Labor .....	1,000.00
<hr/>	
	1,800.00
<hr/>	
	8,979.00
For contingencies .....	1,500.00

---

Total ..... 10,479.00

2. Administration building, wards 1 and 2, kitchen and passage:

Cost of Unit No. 1.....	₱10,479.00
Ward No. 2.....	3,924.00

---

14,403.00

3. Administration building, wards 1, 2 and 3, operating room, kitchen and passage:

Unit No. 2.....	₱14,403.00
Ward No. 3 and operating room.....	6,400.00

---

20,803.00

NOTE.—Estimated cost of original plan, that is, with semicircular corridor, is ₱22,065.80.

This estimate is based upon the building shown by Plate III, upper elevation (floor plan, pl. I).



## IV.

## 1. Administration building Ward No. 1, kitchen and passage:

Lumber .....	₱1,650.00
Bamboo .....	800.00
Sawale .....	150.00
Windows .....	430.00
Doors .....	454.00
Hardware .....	250.00
Galvanized-iron sheet .....	175.00
Sanitary fixtures .....	800.00
Concrete work .....	1,600.00
Transportation .....	1,000.00
Labor .....	1,800.00
	<hr/>
	₱9,109.00
For contingencies .....	1,500.00

Total ..... 10,609.00

## 2. Administration building Wards 1 and 2, kitchen and passage:

Cost of Unit No. 1.....	₱10,609.00
Ward No. 2 .....	3,969.30
	<hr/>
	14,578.30

## 3. Administration building Wards 1, 2 and 3, operating room kitchen, and passage:

Cost of Unit No. 2.....	₱14,578.30
Ward No. 3, operating room.....	6,600.00

Total ..... 21,178.30

NOTE.—Estimated cost of original plan, that is, with semicircular corridor is ₱22,430.30.

This estimate is based upon the building shown by Plate III, lower elevation (floor plan, pl. I).

## V.

The following is an estimate of the cost of a more ornamental concrete structure, with tile roof, and second story to the Administration Building. The plans are shown on Plates IV, V, and VI. The various units as shown on Plate IV are estimated to cost as follows:

No. 1, Center wing.....	₱39,949.01
No. 1-A, Ward No. 1, kitchen, corridors, etc.....	37,036.87
No. 2, Ward No. 2.....	11,711.18
No. 3, Ward No. 3 and operating room.....	30,233.84
	<hr/>
Total .....	118,930.90

## VI.

*Wooden structure with concrete tile roof and sidings.*

[New building materials.]

Unit No. 1.—Administration building, Ward No. 1, kitchen and passage as shown:

Lumber .....	₱3,400.00
Cement tiles for roof.....	936.00
Cement slabs for sidings.....	432.00
Hardware and galvanized iron sheets.....	325.00
Bolts, nails, tension rods, etc.....	150.00
Sanitary fixtures .....	800.00
Concrete work .....	500.00
Windows .....	430.00
Doors .....	454.00
Transportation .....	1,200.00
Labor .....	2,900.00
	<hr/>
	₱11,527.00
Contingencies .....	1,700.00
	<hr/>

13,227.00

Unit No. 2.—Administration building, Wards 1 and 2, kitchen and passages:

Cost of Unit No. 1.....	₱13,227.00
Ward No. 2.....	5,367.00
	<hr/>

18,594.00

Unit No. 3.—Administration buildings, Wards 1, 2, and 3, operating room, kitchen and passage:

Cost of Unit No. 2.....	₱18,594.00
Ward No. 3 and operating room.....	9,000.00
	<hr/>

27,594.00

Estimated annual cost of operation of hospitals of different capacities.

Item.	Capacity.			
	6 beds.	12 beds.	20 beds.	50 beds.
Chief of hospital <sup>a</sup> -----	1----- \$000.00	1----- \$000.00	1----- \$000.00	1----- \$000.00
Chief nurse <sup>b</sup> -----	1----- 600.00	1----- 600.00	1----- 600.00	1----- 720.00
Nurses <sup>b</sup> -----	1----- 600.00	1----- 600.00	2 at \$600 each-----	4 at \$600 each-----
Clerk <sup>b</sup> -----	1----- 600.00	1----- 480.00	1----- 600.00	1----- 720.00
Property clerk-----				1----- 480.00
Pharmacy clerk-----				1----- 600.00
Visiting physician <sup>c</sup> -----	1----- 000.00	1----- 000.00	1----- 000.00	1----- 000.00
Cook <sup>b</sup> -----	1----- 180.00	1----- 180.00	1----- 240.00	1----- 480.00
Servants <sup>b</sup> -----	1----- 120.00	2 at \$96 each-----	3 at \$96 each-----	5 at \$96 each-----
Laundress <sup>d</sup> -----	1----- 120.00	1----- 180.00	2 at \$120 each-----	2 at \$180 each-----
Emergency employees <sup>e</sup> -----			96.00	360.00
Subsistence:				120.00
Patients-----				
Medicines, surgical supplies, etc-----	900.00	1,800.00	3,000.00	7,000.00
Hospital supplies-----	500.00	1,000.00	1,800.00	3,000.00
Fuel and light-----	175.00	300.00	500.00	2,750.00
Miscellaneous incidentals-----	150.00	250.00	400.00	1,800.00
Repairs to equipment-----	175.00	300.00	500.00	1,500.00
Freight, etc-----	100.00	200.00	300.00	600.00
Total cost per annum-----	3,620.00	6,582.00	11,564.00	23,760.00
Average cost per patient per day-----	1.65	1.58	1.58	1.80

<sup>a</sup> This officer may be either the district health officer or the president of a local board of health and, receiving salary as such, receives no additional compensation as chief of the hospital.

<sup>b</sup> Also receives subsistence but no quarters.

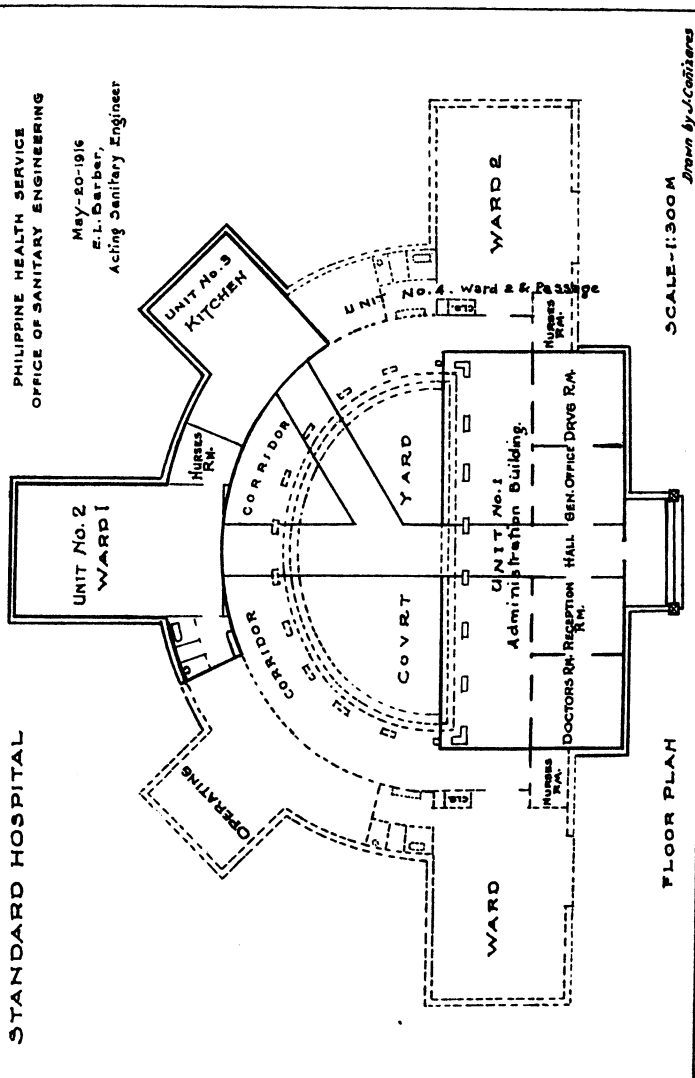
<sup>c</sup> This officer may be the president of a local board of health and, being paid as such, receives no additional compensation as visiting physician of the hospital.

<sup>d</sup> Without subsistence or quarters.

<sup>e</sup> This fund is for the hire of additional temporary help in case of emergency.



PHILIPPINE HEALTH SERVICE  
OFFICE OF SANITARY ENGINEERING  
May-20-1916  
E. L. Barber,  
Acting Sanitary Engineer



FLOOR PLAN

SCALE-1:300M

Drawn by J. Conners

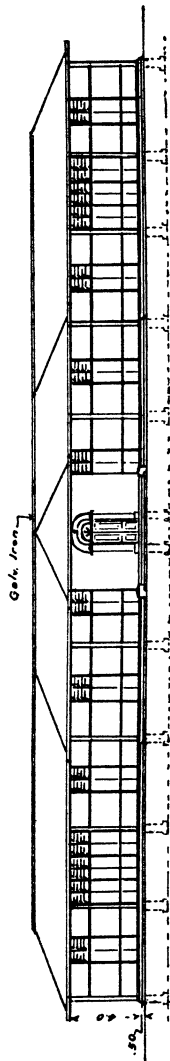
Part in solid lines indicates absolutely necessary portions to be constructed. Dotted lines indicates how structure may be developed in future as needs arise.

PLATE I.



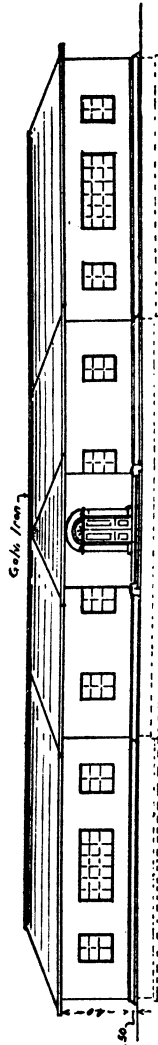
## STANDARD HOSPITAL

SCALE 1:300



*Concrete Foundation and Floor, wooden walls & partitions, - Galv. Iron roofing - ceiling of wood.*

May 20-1916  
E.L. Barber  
Acting Sanitary Engineer



*Reinforced Concrete Construction - Galvanized Iron Roofing - Ceiling of wood.*

*Drawn by J. Cellier*

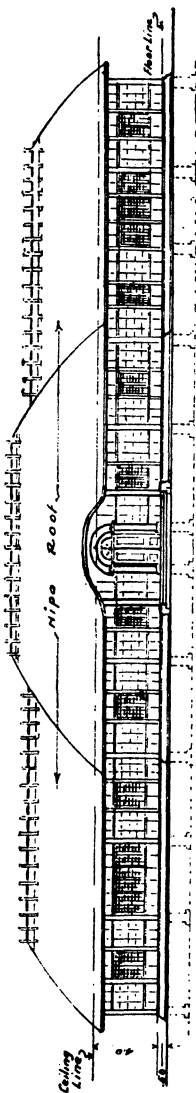
Sheet No. ①

PLATE II.





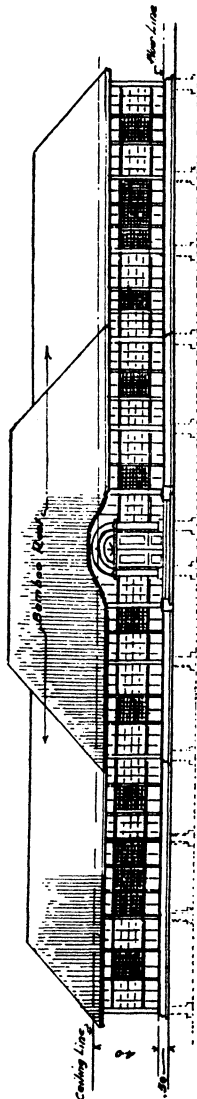
PHILIPPINE HEALTH SERVICE  
OFFICE OF SANITARY ENGINEERING  
STANDARD HOSPITAL



*Wooden posts; partitions of sawali; bamboo floor raised from the ground;  
Nipa Roof; side walls of bamboo.*

May 20, 1916  
E.L. Barber  
Acting Sanitary Engineer

SCALE - 1:300 M.



*Concrete foundations; wooden posts; wood or bamboo floor; ceiling of wood;  
Partitions of Sawali with wooden supports; roofing of bamboo or nipa; side walls  
of bamboo or wood.*

Sheet No. 2

Drawn by J. Carver



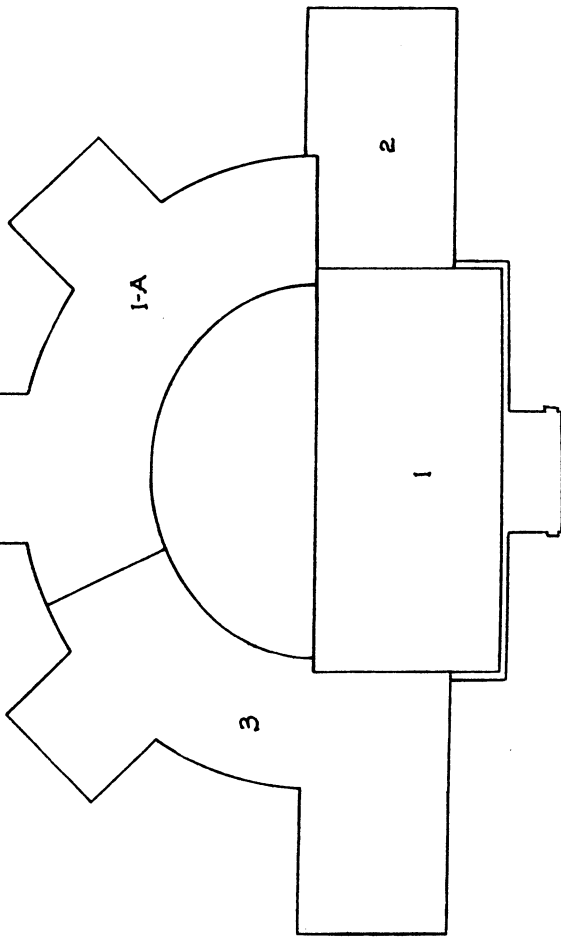
D-16-32

# STANDARD HOSPITAL

SCALE - 1:300 M.

PHILIPPINE HEALTH SERVICE  
OFFICE OF SANITARY ENGINEERING

April - 1937  
E. L. Barber  
Sanitary Engineer



Drawn by J. C. C. C.

PLATE IV.

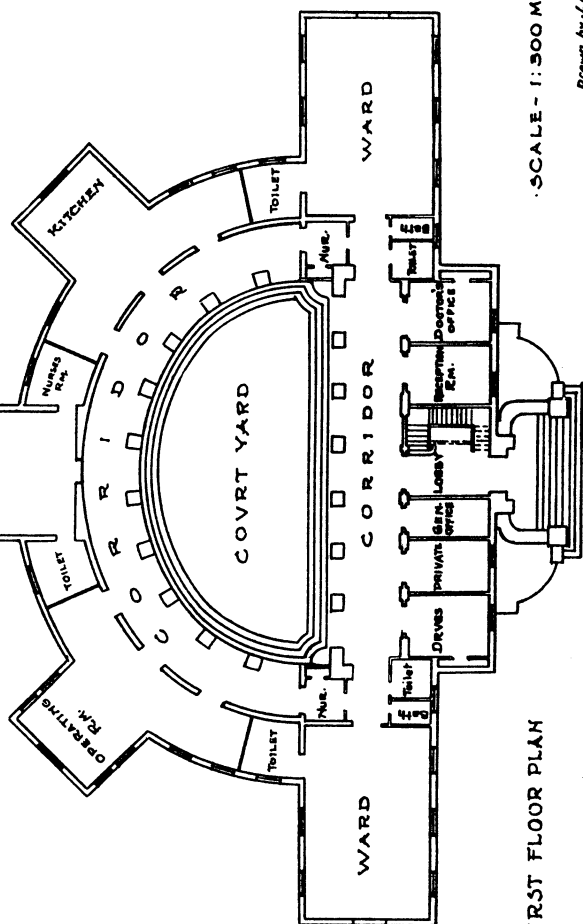


## STANDARD HOSPITAL

PHILIPPINE HEALTH SERVICE  
OFFICE OF SANITARY ENGINEERING

AUG. 21-1918

E.L. Barber  
Acting Sanitary Engineer



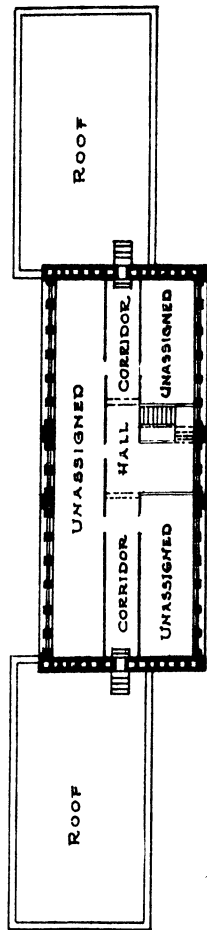
FIRST FLOOR PLAN

SCALE - 1:500 M.

Drawn by J. Calisera

PLATE V.

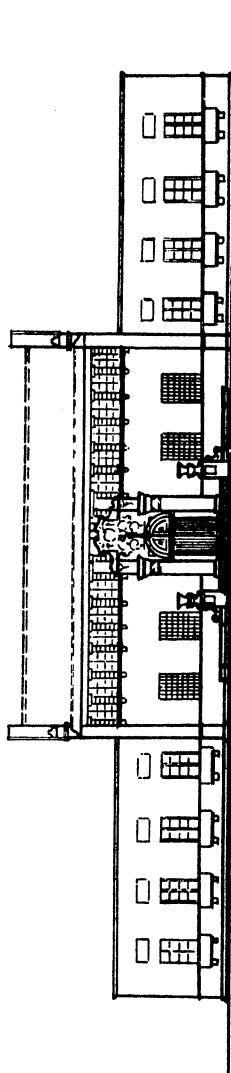




SECOND FLOOR PLAN

STANDARD HOSPITAL  
SCALE-1:300M

AUG. 21-1916  
E. L. Barber  
Acting Sanitary Engineer



FRONT ELEVATION

Drawn by J. Carizares











